TY-ADAMS, RODNEY-Enc# 43328731-Leac-I-I-8/3/2012 Consents-8/4/2012--C00001-104 THIS FORM IS DESIGNED TO COMPLY WITH THE REQUIREMENTS PROMULGATED BY THE TEXAS MEDICAL DISCLOSURE PANEL DISCLOSURE AND CONSENT MEDICAL AND SURGICAL PROCEDURES ETMC ADAMS TRANSFUSION OF BLOOD AND BLOOD COMPONENTS DC-0010 REV. 11/11 TO THE PATIENT: You have the right, as a patient, to be informed about your condition and the recommended surgical, medical, or diagnostic procedure to be used so that you may make the decision whether or not to undergo the procedure after knowing the risks and hazards involved. This disclosure is not meant to scare or alarm you; it is simply an effort to make you better informed so you may give or withhold your consent to the procedure. (Vress I (we) voluntarily request Dr. as my physician, and such associates, technical assistants and other health care providers as they may deem necessary, to treat my condition which has been explained to me as: I (we) understand that the following surgical, medical, and/or diagnostic procedures are planned for me and I (we) voluntarily consent and authorize these procedures: Transfusion of Blood and Blood Components I (we) understand that my physician may discover other or different conditions which require additional or different procedures than those planned. I (we) authorize my physician, and such associates, technical assistants and other health care providers to perform such other procedures which are advisable in their professional judgment. i (we) (do) (do) (do) consent to the use of blood and blood products as deemed necessary. (we) (do) to not) authorize ETMC and/or my physician to photograph/video or permit other persons to photograph/video my surgery/procedure. I understand a Adeotape will not be maintained as part of my medical record. I (we) understand that no warranty or guarantee has been made to me as a result to cure. Just as there may be risks and hazards in continuing my present condition without treatment, there are also risks and hazards related to the performance of the surgical, medical, and/or diagnostic procedures planned for me. I (we) realize that common to surgical, medical, and/or diagnostic procedures is the potential for infection, blood clots in veins and lungs, hemorrhage, allergic reactions, and even death. I (we) also realize that the following risks and hazards may occur in connection with this particular procedure: Transfusion reaction which may include kidney fallure or anemia A.I.D.S. (Acquired immune Deficiency Syndrome) Heart failure Hepatitis West Nile Virus Other infections (we) understand that my physician may elect to have additional personnel, which may include but not be limited to, vendor representatives in the operating room to facilitate the surgical procedure. I (we) understand that anesthesia involves addifional risks and hazards but I (we) request the use of anesthetics for the relief and protection from pain during the planned and additional procedures. I (we) realize the anesthesia may have to be changed possibly without explanation to me (us). I (we) understand that certain complications may result from the use of any anesthetic including respiratory problems, drug reaction, paralysis, brain damage or even death. Other risks and hazards which may result from the use of general anesthetics (ange from minor discomfort to injury to vocal cords, teeth or eyes. I (we) understand that other risks and hazards resulting from spinal or epidural anesthetics include headache and chronic pain. I (we) have been given an opportunity to ask questions about my condition, alternative forms of an esthesia and treatment, risks of nontreatment, the procedures to be used, and the risks and hazards involved, and I (we) believe that I (we) have sufficient information to give this informed consent. I (we) certify this form has been fully explained to me, and I (we) have read it or have had it read to me, that the blank spaces have been filled in, and that mane - Wanda I (we) understand its contents. man 🗆 a.m 🗆 10.m. PATIENT / OTHER LEGALLY RESPONSIBLE PERSON SIGNATURE WITNESS: Name: Address: . UCham I have discussed the following with the patient and on significant otherics: The patient's proposed care, treatment, and services. The potential benefits, risks, and side effects of the patient's proposed care, treatment, and services, the likelihood of the patient achieving his or her goals; and any potential problems that might occur during recuperation. The resconsible effects related to the atternatives and the risks related to not receiving the proposed care, treatment, and services. The risks, benefits, and side effects related to the atternatives and the risks related to not receiving the proposed care, treatment, and services. Commitments under which information about the patient must be disclosed or reported, and when indicated, limitations on confidentiality of information learned from or about the patient. 🔲 a.m 🗋 p.m. Physician's Signature: Copy of OIG case to Litigation Support on 04.19.2013 by ce. UNAUTHORIZED COPYING OR VIEWING PROHIBITED Page 1 of 1

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sed so that you may make the d	lectsion whether or not to	o undergo the procedure after k	d the recommended surgical, medical, or diagnostic procedure to be mowing the risks and hazards involved. This disclosure is not meant or withhold your consent to the procedure.
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TY-ADAMS, RODNEY-Enc# 43328731-_ .-I-I-8/3/2012 Consents-8/3/2012--C00001-1p_

PATIENT IDENTIFICATIVA

TREATMENT AUTHORIZATION AND TERMS OF TREATMENT AGREEMENT





78386 REV. 2/12

- A. Consent for Surgical and/or Medical Treatment: I hereby grant permission to the physicians in charge of the case of the above-named patient to employ such surgical, x-ray and technical procedures as they may deem necessary in the diagnosis and treatment of this case.
- B. Accidental Exposure of Healthcare Worker's Lunderstand that Texas law provides and Lagree, if any healthcare worker is exposed to my blood or other bodily fluid, to allow East Texas Medical Center (ETMC) to perform test(s) on my blood or other bodily fluid to determine the presence of any communicable disease, Including but not limited to, Hepatitis, Human immunodeficiency Virus (which is the causative agent of AIDS) and Syphilis. I understand that such testing is necessary to protect those who will be caring for me while I am a patient at ETMC. I understand the results of tests taken under these circumstances do not become a part of my medical record.
- C. Independent Physicians: ETMC and any other hospital, or entity operated as a part of the East Texas Medical Center Regional Healthcare System (collectively referred to as the "Hospital"), is not responsible for the judgment or conduct or any physician who treats or provides a professional service to me, but rather each physician is an independent contractor who is self-employed and is not the agent, servant, or employee of the Hospital. I further understand that other physicians may be called upon to provide care, either directly (as consultants) or indirectly through professional services (Le. Radiology, Pathology, EKG Interpretations, Anesthesiology). These physicians are also independent contractors who are self-employed and are not the agents, servants, or employees of the Hospital. It is also understood that for emergency services, the Hospital may ald my selection of physicians by an established "on-call" roster provided through each department of the Hospital. These physicians are also independent contractors who are self-employed and are not the agents, servants, or employees of the Hospital. I further agree the Hospital is not responsible for the judgment or conduct of any of the physicians identified above.
- D. Authorization to Release Information: I hereby authorize any physician or hospital who has attended me to furnish the insurance company, third party payer or its representative, any attending or consulting physician, nursing home or facility or other health care facility to which the patient is transferred or later receives treatment, any medical record, x-ray, test record or result or other information requested. A photo copy of this authorization is to be considered valid. I understand this release specifically includes any and all blood and related tests including test results reflecting presence of HIV and HBV and other diseases, all of which I specifically authorize to be released. For purposes of treatment, I understand that the hospital may access my medication history through an electronic database.
- E. Authorization to Disclose Information: Except as otherwise set forth herein or allowed by law, I do not authorize the release of any information to others not acknowledged above. I wish to be a "no information" patient, and I realize that flowers, telephone calls and visitors will be refused on my behalf. (Patient's
- F. Assignment of Benefits: In consideration of hospital services rendered, I hereby assign and transfer to ETMC, all money due or to become due or payable to me under my insurance policy, or third party payment agreement up to the total amount of my account with ETMC. I will be responsible for and will pay any amount due to ETMC not paid by my insurance company or third party payer, and if the insurance company refuses to pay any amount of my claim, I agree to pay my entire bill to ETMC. I certify the information given by me in applying for payment under Title XVIII of the social Security Act is correct.
- G. Physician's Assignment of Benefits: I direct insurance benefits be paid directly to physicians with ETMC that provide professional services to me as a result of my hospital stay.
- H. Medicare and Champus/Champva Rights (Medicare/Champus Patients Only): I acknowledge I have received a copy of the Medicare/Champus Rights. (Patient's Initials:
- L Personal Valuables: I understand ETMC maintains a safe for money and valuables, and ETMC, will not be responsible for loss of or damage to any property of money unless deposited with ETMC for safekeeping and a written safekeeping receipt is issued by ETMC. (Patient's Millals:
- J. Safety: I understand, for reasons of safety, personal electrical items are not approved for use in ETMC. Such items include hair dryers, curling from: not rollers, radios, tape players, razors, heating pads and the like.
- K. Advance Directive: I have been given written materials about my rights to accept or refuse medical treatment and my rights to formulate Advance Directives and have acknowledged whether or not I have executed an Advance Directive. I undergrand that I am not required to have Advance Directives in order to
- receive medical treatment at this healthcare facility. (Patient's Initials: 1. No Warranty: I understand that no warranty or guarantee has been made to me as to result or our M. Patient Rights: I have been given written materials about my rights as a patient. (Patient's Initial

a.m. / p.m. Signature of Patient or Legally Authorized Representative

Name & Rei Reason Patient Unable to Sign

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TY-ADAMS, RODNEY-Enc# 43328731-EMR&I-I-8/3/2012 eConsultation Report-8/4/2012-Gary . Gross, MD-HP0008-lpg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Gary . Gross, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

DATE OF CONSULTATION 08/04/2012

REFERRING PHYSICIAN Dr. David Jones.

INDICATION Coagulation/coagulopathy

HISTORY OF PRESENT FLLNESS

A very unfortunate situation of a 45 year-old inmate who was apparently perfectly well. He had lunch. After lunch apparently the fellow inmates in the holding tank noted that he was having seizures. They grabbed him to keep him from hurting himself. He was evaluated and noted to have a high temperature of 108 degrees. He was ultimately brought here where he was also noted to have a temperature that high which rapidly came down. He was admitted in the middle of the night to the hospitalists service and Dr.——Jones saw the patient in consultation.

The patient has received 6 units of fresh frozen plasma, 6 units of platelets and 4 units of red cells. He continues to bleed profusely through a rectal tube. He has been unresponsive with sluggish pupil, glarey response, and hypotensive.

In terms of any prior relevant history he was on Seroquel and his dose has recently been increased from 300 to 500 mg. He had been in the county jail and had been removed from there to be taken to the holding tank for the state penitentiary. His mother, whom I spoke to on the phone, said he was extremely upset about that; however, he never voiced any suicidal ideation.

He was noted to have a large ecchymosis in his left eye when he presented to the medical staff at the prison. No one verbalized having witnessed any altercations.

His mom said that he was a drug addict but quit 7 years ago. He does drink beer but never heavily.

CONSULTATION REPORT

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TY-ADAMS, RODNEY-Enc# 4332873. (-I-I-8/3/2012 eConsultation Report-8/4/2 .-Gary . Gross, MD-HP0008-1pg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Gary. Gross, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

PAST MEDICAL HISTORY/REVIEW OF SYSTEMS

Generally good health. Apparently has hypertension, neuropathy, depression.

MEDICATIONS

- 1. Seroquel 500 mg.
- 2. Lisinopril unknown dose.
- 3. Gabapentin unknown dose.

ALLERGIES

NO KNOWN ALLERGIES

PHYSICAL EXAMINATION

VITAL SIGNS: On examination now his blood pressure is 150/30. GENERAL: He is unresponsive. His pupils are very large and slowly responsive. He has some blood trickling from his mouth. He is intubated.

LUNGS: Diminished breath sounds at the bases. CARDIOVASCULAR: Regular rate without S3.

ABDOMEN: Distended. No obvious rebound tenderness. There are a few bowel-

EXTREMITIES: No edema.

DATA REVIEWED

CBC with hemoglobin initially 11.5 down to 6.9 and now up to 11 post transfusion. Platelets are 57,000 with repeat pending. White count of 19,800 on admission with a left shift.

Prothrombin time greater than 320. Partial thromboplastin time of 243. D-dimer greater than 69,000. Fibrinogen degradation products greater than 40.

Review of peripheral blood smear demonstrates no schistocytes. There are a few nucleated red cells, particularly in the second specimen, but no sign of any abnormal image or cells.

IMPRESSION

Fulminate disseminated intravascular coagulation (DIC), with no suggestion of TTP. I suspect this is the aftermath of what appears to be an episode of malignant neuroleptic syndrome related to psychotropic drugs but

CONSULTATION REPORT Page 2 of 3

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TY-ADAMS, RODNEY-Enc# 43328731-bruk-I-I-8/3/2012 eConsultation Report-8/4/2014-Gary . Gross, MD-HP0008-lpg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Gary. Gross, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

exacerbated by the extremely hot conditions within the holding tank.

Would consider the possibility the patient could have had sepsis, but the fulminate presentation, very high fevers, and the lack of obvious source make that seem much less likely. At any case at this point the prognosis is extremely poor. I have talked to the patient's mother by phone and shared this with her. She has already accepting the fact that he will virtually certainly die.

RECOMMENDATIONS 3

I will update coagulation studies and "fill up his tank" with appropriate transfusion of red cells, platelets and fresh frozen plasma. At that point, unless there is significant clinical recover, which I think is extremely unlikely, I would not continue to use precious blood products.

I appreciate the consultation. Will definitely follow the patient with you.

cc: William Chace Conner, MD

TR: tmv JOB#: 111877516

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CONSULTATION REPORT

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

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REASON FOR CONSULTATION

Critical care and ventilator management.

HISTORY OF PRESENT ILLNESS

The patient is an unfortunate 45-year-old male who looks very much older than his stated age with a history of chronic alcoholism. He has been incarcerated since March. He was recently transferred to a facility the 2nd. Prior to his transfer he was hit by another inmate causing a left periorbital ecchymosis and laceration. Approximately 30 minutes after dinner patient was reported to be found to a guard unresponsive with agonal breathing. He was being held by inmates that were surrounding him who stated that he'd had a seizure and they were holding him "to keep him from hitting anything." Patient was then brought to the Emergency Room where he was found to have some upper and lower GI bleeding and hypotension. He was intubated and brought to the Emergency Room. His temperature had been 107.9 on arrival. The most recent temperature we've obtained here after arriving to the ICU in Tyler is 99.2 degrees and this is without any cooling measures performed. Thus far I have given patient one liter of IV fluids. He has had multiple bags of fresh frozen, currently receiving platelets and blood. He continues to profusely bleed. His PT and PTT is extremely high, unreadable and his repeats are pending. Fibrin split products were elevated indicating a possible TTP. Multiple differentials have come to mind. He has been on Seroquel for depression and his mother states approximately one month ago, it was recently increased from 300 to 500. Overall the patient is critically ill. He is on multiple pressors including Neo, Levo and vasopressin at this point. Profuse lower GI bleeding is being contained in a Flexi-seal that is continuous. Patient continues to have hypotension despite fluid bolus, despite multiple pressures, despite blood products being infused. I have discussed the severity of the situation with his mother and his daughter who are aware of the severity and at this point in time they want us to continue efforts. If patient dose have a cardiac arrest, the patient is not to receive CPR according to his mother.

PAST MEDICAL HISTORY

- 1. Coronary artery disease. He had an MI at a younger age.
- 2. GERD.
- 3. Bloody stools since April.

CONSULTATION REPORT

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

4. Depression.

PAST SURGICAL HISTORY

Multiple known surgeries including bilateral hip surgery, GI surgery in 2011, back surgery and neck surgery in 2012.

SOCIAL HISTORY

He has been incarcerated since March. He is a one pack per day smoker. Heavy drinker up until the time of the incarceration at approximately 8-12 beers per day.

ALLERGIES
NONE REPORTED

MEDICATIONS

Per mother includes,

- 1. Seroquel 500 mg.
- Lisinopril dose unknown.
- 3. Gabapentin dose unknown.

FAMILY HISTORY

Unknown.

REVIEW OF SYSTEMS

Unable to obtain as he is currently intubated.

ANCILLARY DATA

Initially received in Palestine includes drug tox screen which is negative. His initial chemistries showed a sodium of 130, potassium 5.9, chloride 98. C02 23. His glucose was 105, BUN 24 and a creatinine elevated at 2.2. His AST was 40, ALT 30. Alkaline phosphatase was 117. His initial CKMB was 0.8. Alcohol level was nil. His CBC showed a white count of 7,000, hemoglobin 12 and a hematocrit of 37 with a platelet count of 183. His differential showed 33% segs and 1% bands. CT of the head without IV contrast showed no acute intracranial abnormalities. Urinalysis was unremarkable. Platelets were within normal range at 183.

Ancillary data here in Tyler includes ABGs on arrival showing a pH 7.15, pC02 45, p02 83.4 and a bicarb of 15.6 on assist control of 14, 650 and 5 CONSULTATION REPORT

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

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of PEEP. A repeat ABGs just obtained showed a pH 7.16, pC02 47, p02 of 300 with a bicarb of 16.8, base excess of -11 on assist control, 14, 655 and 100%. Changes made to the vent were an increased respiratory rate of 22 and a reduced FI02 of 50%. His ionized calcium was 0.8. He has been given two amps of calcium gluconate.

His cardiac enzymes on arrival showed a CK 1,321, CKMB 16.8, troponin 38. His BNP was 8. His chemistries on arrival showed a sodium of 137, potassium 4.5, chloride 106, C02 18, glucose 108. BUN 31, creatinine down trending to 1.58 from his original presenting of 2.2. His AST elevated at 271. Total bilirubin 1.8, direct bilirubin 0.85. His calcium is 6.6 and blood albumen 2.7. Fibrinogen degradation products were more than 40. His CBC showed a white count of 19,000, hemoglobin 11 and hematocrit 34 with a platelet count of 57 with 59% segs and 12% bands. His chest x-ray showed an ET tube in good position. His NG tube is in good position otherwise no abnormalities.

CT of the head as stated above from Palestine. Coags are pending.

Current IV medications infusing include Levophed, vasopressin, neo-synephrine and patient had received a liter of normal saline which he continues to receive normal saline at 200 cc's per hour along with the bicarb drip 100 cc's, 5% and 100 cc's per hour. Central line was just placed by Dr. Jones.

ASSESSMENT AND PLAN

- 1. Shock, multifactorial in nature, questionably septic shock as well as hypovolemic shock.
- 2. Acute respiratory failure receiving mechanical ventilatory support.
- 3. Shock liver secondary to #1.
- 4. Elevated troponin with a cardiac history.
- 5. Acute renal failure.
- 6. Severe acute anemia blood loss.
- 7. History of heavy alcohol abuse.
- 8. Severe upper and lower GI bleed.

IMPRESSION AND PLAN

1. He has already received multiple antibiotics including vancomycin, CONSULTATION REPORT

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

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Zosyn and clindamycin which we are continuing routinely. Blood cultures, urine cultures and sputum cultures have been obtained and we are following. Continue bicarb drip. Continue aggressive fluid resuscitation.

- 2. Acute respiratory failure with mechanical ventilatory support. Continue vent support with a metabolic acidosis. Continue bicarb. We have increased his respiratory rate. Will follow.
- 3. Elevated troponin with a history of coronary artery disease and MI in the past. Will follow cardiac enzymes, obtain echocardiogram.
- Severe hypotension and metabolic acidosis. Maintain pressures. We will add steroids.
- 5. Hypocalcemia. Correct electrolytes per protocol and follow.
- Acute renal failure secondary to the above. Aggressive IV fluids and follow I's and O's, creatinine.
- 7. Acute anemia with blood loss with coagulopathy. Transfusing fresh frozen platelets and blood rapidly following his H H.
- 8. History of alcohol abuse with history of GI bleeding in the past. If patient makes it through to night, we will need GI evaluation for possible scoping.
- 9. Severe upper and lower GI bleed supported with transfusions, possibly currently a DIC/TTP. Continue supportive and aggressive care as stated above.
- 10. Shock liver secondary to the above.

Overall patient's prognosis is very poor and critical in nature. This was discussed with the family. Patient wishes to continue current care with no CPR if patient goes into a cardiac arrest.

Total critical care time with patient approximately one hour and 45 minutes. Patient is seen by myself as well as Dr. Jones and Dr. Jones will add an addendum. He agrees and collaborates with the plan as stated above.

Dictated by: Christine Porter, ACNP

cc:

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

CONSULTATION REPORT

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David L Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

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Signed by JONES MD, DAVID I on 04-Aug-2012 17:42:52 -05:00

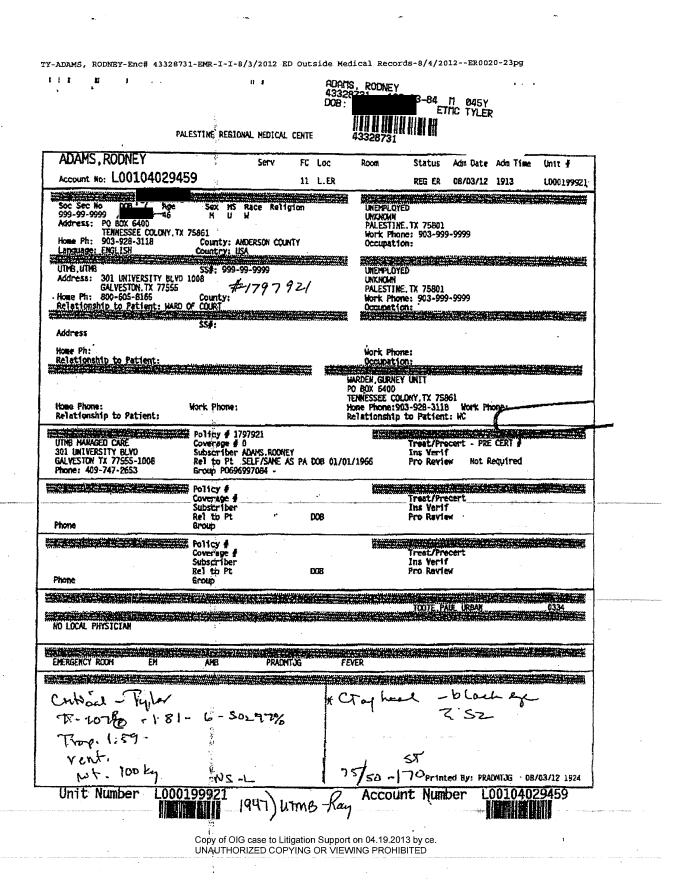
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Palestine Regional Medical Center 2900 South Loop 256 Palestine, TX 75801 PAGE 1

Johnny L. Haley, MD

LAB RESULTS Broadcast REPORT

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ADAMS RODNEY 43328731 129-03-84 M 645Y DOB: ETHC TYLER

ine Regional Medical Center 1900 South Loop 256 Palestine, TX 75801 PAGE 1

Johnny L. Haley, MD

RESULTS Broadcast REPORT

ADAMS, RODNEY Attend Dr: TOOTE, PAUL URBAN Age/Sex: 46/M Acct#: L00104029459 Unit#: L000199921 DOB: 08/03/12 Status: REG ER Disch: Location: Reg: Specimen: 0803:PAR:C000795 Reg#: 00605006 Collected: 08/03/12-1930 By: PRNURAW Status: COMP. Received: 08/03/12-1945 By: PRLABTDB Ordering Dr: TOOTE, PAUL URBAN Verified Test Result Flag Reference CMP 130 L 136-145 mmol/L NA 08/03/12-2014 K H 3.5~5.1 mmol/L 08/03/12-2014 98-107 mmol/L 98 08/03/12-2014 CO₂ 21-32 mmol/L 23 08/03/12-2014 ANION GAP 4.8-21.0 mmol/L 14.9 • [08/03/12-2014 70-110 mg/dL GLUCOSE 105 08/03/12-2014 24 7-18 mg/dL 08/03/12-2014 CREATININE 0.8-1.3 mg/dL 2.2 08/03/12-2014 6.4-8.2 g/dL TOTAL PROTEIN 7.0 08/03/12-2014 ALBUMIN 3.2-4.7 g/đi 08/03/12-2014 8.5-10.1 mg/dL CALCIUM 08/03/12-2014 BILI TOTAL 0.2-1.0 mg/dL 1 08/03/12-2014 15-37 U/L 08/03/12:2014 AST 40 12-78 U/L 08/03/12-2014 ALT 30 Please make note of the New Reference Range of ALT. This change incorporates the new ALT"I" (International Standardization of ALT) ALK PHOS 117 50-136 U/L 08/03/12-2014 CK 39-308 U/L 08/03/12-2014 165 OSMOLALITY CALC 270-290 08/03/12-2014 > 274 OSMOLALITY IS A CALCULATED RESULT BASED ON THE SODIUM, GLUCOSE AND BUN RESULTS. > CKMB 0.0-3.6 ng/mL 08/03/12-2014 08/03/12-2014 > ETOH mg/dL Texas legal limit for intoxication = 0.08 % = 80 mg/dL To convert mg/dL to percent, move the decimal point three places 10 mg/dL = 0.01 % to the left. ie

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Palestine Regional Medical Center 2900 South Loop 256 Palestine, TX 75801 PAGE 1

Johnny L. Haley, MD

LAB RESULTS Broadcast REPORT

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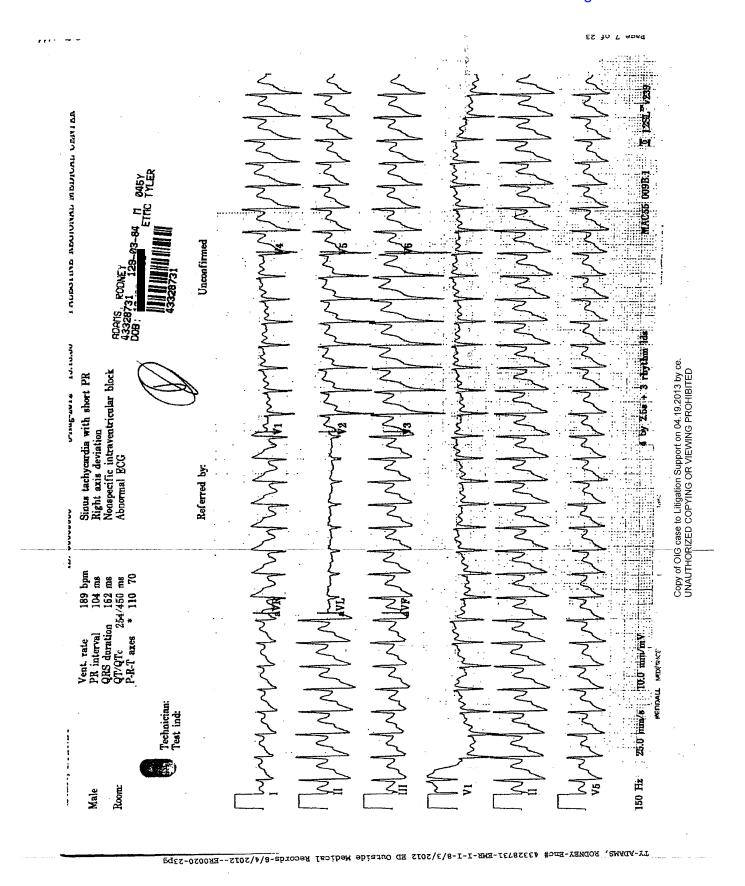


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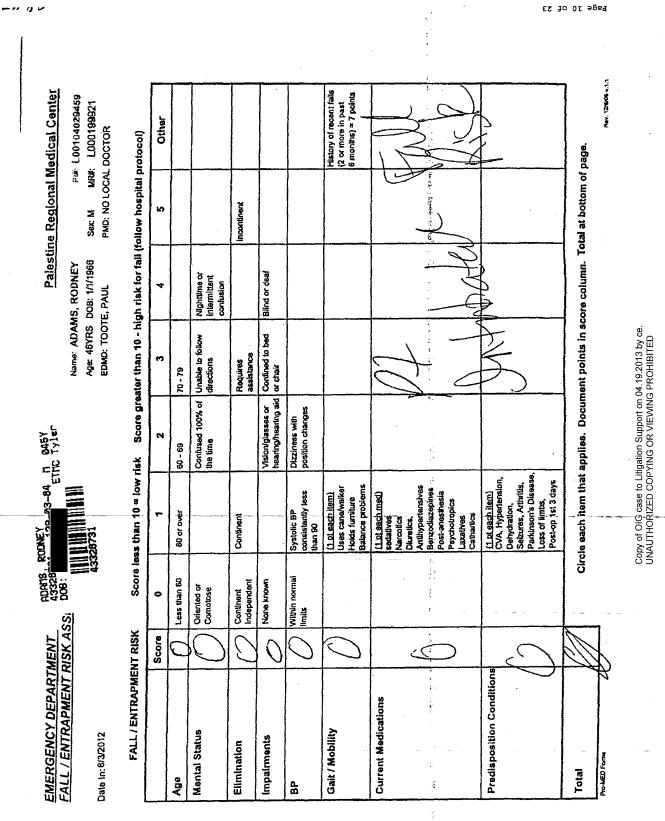
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	reg. rate & rhythm		·
	heart sounds nml	murmur grade/6 sys/dias	_antibiotics given
	ABDOMEN (GI)	gziliop (S3 / S4) guarding / tenderness	CAP-SoOZ / VS / MSE / antibiotic(s) / pathogen / Clinical Tool Box
	non-tender	hepatomegaly / splenpmegaly / mass	BC/CXR or CT/transferCURB-65/PORT
	no organomegaly	_ ren Intended	+ Syncope-EKGJohnston TIA risk
	nml bowel sounds*		TOTAL A CONTROLLER
	1		non t-PA candidate / time > 3 hours / tinknown minor deficit / clinically improving / other
	SKIN	cyanosis / diaphoresis / palior / ecchymosis	Discussed with Dr. Charles Additional history from:
	warm, do		will see patient in: ED/hospital/office family coretaker paramedics
	-Charles and a constant		Counseled passent family regarding: Rx gived
	EXTREMITIES (MS)	tenderness	(lab / rad results diagnosis need for follow up
	not_retor	pedal edema	Smoking Cessition: discussed: plan / stigger / chollenges / gove Rx. time: min CRIT CARE TIME [excluding separately billable procedures].
	nml NOhi* no peral edema	Homan's step / cords	30-74 min 75-104 minmin
	EKG & XRAYS	No nevertent of Ext	CLINICAL IMPRESSION
	,	miatries ABG UA (175 N	
	Connel except Goomic	LENCEPT RA/_LO2 normal except .	Alcohol Intoxication Hepatic Encephalopathy Chronic Dementia Intracerebral / Subarachnoid Bleed
	WBC Na_	7	Confusion / Stupor / Coma Meningitis / Encephalitis / Sepsis
	Hgb. 12 5 K	5.9 pCO2 Cultures	Dehydration / Volume Depletion + Pneumonia
		HCO3 blood x	Hypernatremia / Hyponatremia Seizures / Post-Ictal State
		ZY INR ETOH	Hypoglycemia / Insulin Reaction Subdural Hematoma
	bands I BUN	ZY INR ETOH	Overdose / Substance Abuse + Syncope + CVA (Stroke) Transient (schemic Attack
	750 139 Cres	2.2 ammontaTOX	hemorrhogic non-hemorrhogic Urinary Tract Infection
	RHYTHM STRIP ZN	ISR Rate Sague Brand 80	Beren Humshirman A Tringum
		rp. by me Reviewed by me Rate	Hyperkollening
	NSR nml intervals	nmi axis nmi ORS nmi ST/T	DISPOSITION- home Personserred Light
	Simp Auch	□Reviewed by me [*] □Discsd w/ radiologist	Time DadmittedPOA decaditus / UTU foler)
	CXR Sinterp. by me	Reviewed by mit Discod w/ radiologist	CONDITION- unchanged improved stable
	nmi / NADno infi	trates _ nml heart size _ nml mediastinum	Care transferred to Dr Timei.
	CT Scan head	Discsol w/ radiologist	RESIDENT / PA / NP RTI #
	nml / NAD		ATTENDING NOTE: Please see resident / MLP note for details Resident/PA/NP's history reviewed. Patient interviewed and examined by me.
1	P		HPT:
-	R Pulse Ox % on	RA/LO ₂ Intern: nml / hypoxic Time:	My personal exam reveals:
į		- 42	exception of
	Linderline indicates organ sys		PHYSICIAN SIGNATURE- A January RTIO
l	* equivalem or mamam requ	ited for pregan system exum	Template Complete See Addendum (Dictated / Template #)
	Altered Memal Status-15		ADAMS , RODNEY waltry Measure Initiative
		•	900 th
			H/46
			Acces L00104029459
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HILL IN LIEU HILLIAN H	ADAMS, RODNEY
	Admir: OF 12 22
43328731	M-46
45 Palestine regional income.	
EMERGENCY PHYSICIAN RECORD	國 1 聖 斯 西 阿 亚 和 图 美 随 城 3 至
+ Altered Mental Status +	
PORI - Physician Quality Reporting Initiative DATE: 8-3-12 TIME: Elonamical ROOM: 7-7	
EMS Arrival EMS treatments ordered	- ROS houted by N+ MS
HISTORIAN: patient spouse (paramedic) NH records	Problems with vision Problems uninating
_HX / _EXAM LIMITED BY:	sore throat diarrhea
TRANSFER FROM: D see transfer record	trouble swallowing black stools
HPI _a	C137 NCAP
chief complaint: decreased mental status / confusion	parpetations joint pain leg / ankle swelling
low blood sugar / diabetic fever desample (MALL)	rash
mre 5 1 Temps	swollen glands
onset / duration: min / hrs / days ago gradual-onset	
Firelay sudden-proset	LNMP preg post-menop [201] systems ner except as marked
upon waking cannot confirm onset gane now intermittent	Crime preg post memor [Ball systems neg except as marked]
better continues in EB more than 3 hours constant	-CONST / CVS / RESP / NELIRO components also addressed in HP1
character of attered mental status:	PAST HX
disoriented / confused / combative / agitated / trouble concentrating	confusion / dementiaasthma / COPD
unresponsive / seizure activity / decreased responsivepess.	CVA / TIA deficit cardiac disease
at was fund you cell of Aus	diabetes Type 1 Type 2. AMI CHF A-Fib diet / oral / insulin hepatitis / HIV
- Constituting antide temp 110.	head trauma hyperlipidemia
, ,	overdose hypertension seizure disorder insect bite
	psychiatric disorder Gibleeding
context:	schizoph. / bipolar / depression
nursing home resident / chronic dements / depression //	_old records ordered / symmary
found uncesponente / unknown duration by nursing home staff bystander family.	Surgeries / Procedures none
dextrostick PTA () given D50 / Narcan PTA	appendectomy hysterectomy / BTL
gpod / marginal / no response	cardiac bypass / stent pacemaker cholecystractomy
resent/heady alcohol intake (beer/wine/liquor)	The state of the s
drug abuse / overdose	Immunizations: Influenza / pneumovax UTD /referred to PCP
tracina head injury and facul truncu	Medications none res nurses note Allereies NKDA
Infection / other family members sick & Leat live to	aspirin coumadin clopidogrel see nurses nobe
new medications (Dene	AN INCOME AND ADDRESS OF A STATE
	and comment of the co
······································	SOCIAL HX smokerdrugs
	alcohol (recent / heavy / occasional) occupation
Usually Cognition	living situation: alone at home in nursing home. Alexander
alen but confused unable to walk	FAMILY HX CVA CAD HJN cerebral aneurysm_Liss.k
alert but disoriented to time uses a cane / walker	Moursing Assessment Reviewed Digits Reviewed
poor alertness walks only w/ assistance	PHYSICAL EXAM bouted by N MS
associated symptoms: new weakness	General Appearance mild / moderate / severe distress
canage flinary	R no acute distress lethargic / obtunded
recent illness decreased ability to stand / walk_ fever / chills week difficult off bolonce	and and an analysis and an ana
fever / chills weak difficult off balance chest pain control walk cannot stand faking	HEAD / EENTscleral icterus / pale conjunctivae
fever / chills weak difficult off balance chest pain compot walk connot stand foling neck / back pain fainting / dizziness	HEAD / EENT scleral icterus / pale conjunctivae per per per per per per per per per pe
fever / chills weak difficult off balance chest pain control walk cannot stand faking	Trought to Lot Could
fever / chills week difficult off bolance chest palm context / back palm failured for failured f	no apparent trauma EOM palsy frequent firsted Court in ENT linspection nml about funduscopic / papitlederna deductive
fever / chills wepk difficult off bolance chest palm confrot walk cannot stand foling neck / back pain faintibg / disziness involuntary movements / seizure abdomiral pain headathe nausea / vomiting	no apparent trauma EOM paisy frequent fixed Could be ENT inspection ami abound funduscopic / papilledema described corporarynx ami deprad gag reflex / handles secretions poorly
fever / chills week difficult off bolance chest pain context and cannot stond foling neck / back pain faintaing / disziness involuntary movements / setzure abdominal pain headache	no apparent trauma EOM palsy
fever / chills wepk difficult off bolance chest palm confrot walk cannot stand foling neck / back pain faintibg / disziness involuntary movements / seizure abdomiral pain headathe nausea / vomiting	no abparent trauma EOM palsy
fever / chills wepk difficult off bolance chest pain context back pain fairting distributed for the fact pain fairting distributed for the fairting distributed fairting distributed for the f	HEAD EENT scleral icterus / pale conjunctivae unequal pupils R 4 mm L 4 mm post-surgical pupiliary defect (R / L). EON's intact post-surgical pupiliary defect (R / L). ENT inspection nml abnml funduscopid / papillederna. ENT inspection nml deprad gar reflex / handles secretions poorly pharyngeal erythema / exudate hemotympanum / raccoon eyes / Battle's sign



TY-ADAMS, RODNEY-Enc# 43328731-EMR-I-I-8/3/2012 ED Outside Medical Records-8/4/2012--ER0020-23pg

TY-ADAMS, RODNEY-Bnc# 43328731-EMR-I-I-8/3/2012 ED Outside Medical Records-8/4/2012--ER0020-23pg

	Palestine Regional Medical Cente ADAMS, RODNEY P#: L00104029459
_ N 31/N	Sex: M MR#: L000199921 TOOTE, PAUL PCP: NO LOCAL DOCTOR
Subjective Notes:	1 1 , - 0
MINSINSIVE F	Toucited 1emp
Pain ☐Patient denies pain	
1 1 1	Burning DAching Severity Scale: Onset:
Provocation:	Aggravating Factors:
Rediating: DNo DY S (Seedy)	onstant Dintermittent Relieving Factors:
Psychosocial	
Appearance: @Clean @Unkempt @Other	Environment: ANO steps D Few steps D Many steps
Mood / Affect / Behavior: DAppropriate Depressed DAnxious	Nutritional status: 12 Normal 12 Cachetic 13 Obese
DTearty Bother UNINSTAS, WE	Religious / Cultural preference: ZiNone (specify)
Caregiven: Self DFamily member DSkynlficant Other DGroup home	
Activity level: Pambulates independently Requires assistance Nor	
Derforms ADL's independently @Requires assistance w	
Neurological IANSKISIVE	GastroIntestinal DNot Assessed
□ Alert □ Oriented X 3 □ Cooperative □ Awake but Confuser	
Uncooperative Combative Agitated Restrained	
Responds: DTo Verbal. DTo Pain . Defresponsive Posturing: DRO Decordicate Decembrate	Bowel Sounds; - Present Decreased Absent
	Etimination: Difformal @Constipation @Diarrhea # of Stools:
Pupils: Brisk Sluggish Fixed Pinpoint Dilated	
 - 	
Extremities: RUE LUF RIF LLF	Genitourinary Julian DiNot Assessed
Extremities: RUE LUE RLE LLE	Urine: Colorless
	□ Anuria □ Dysuria □ Hematycia □ Frequency □ Urgency
Movement: 0=None 1=Barety Breaks Gravity 2=Weak 3=Strong	Vaginal D/C DNO LMP: A
Sensation: NR=No response DP=Deep pain MP=Mod pain LT=Light touch	Penile D/C
#	
Cardiovascutar	Musculoskelstal DNot Assessed
Skin: DWarm DDry Cool DMoist Diaphoretic	Lacerations / Abrasions / Conjusions /
Color: DPink DPile DAshen DFlushed Dayanotic DJaundiced	Location: And Cutor cn(L) Eyl
Capillary Refil: 0<2 Secs (Normal) 2 Secs (Delayed)	Size:
Turgor: Decreased	Bleeding: Propert Present Scant Moderate Heavy Pulsating
Pulses: R L	ROM: POWNL DiDecreased DiAbsent
Carotid	Edema DAbsent 01+02+02+ Deformity 1 Yes 1 No-
Brachial	Scars: Yes GMC Distal pulses: Absent GPresent
Radia	All y served
Femoral !	
Dorsalis Pedis	Pre-Hospital Care DTransport only
S=Strong W=Weak D=Doppler A=Absent	□ CPR PASG□Not inflated IV JVP9 Amit Inflated
Respiratory	initipeted Diegs inflated
Alrway: ZClear DOther	D Mask D C-Collar
Effort: Unlabored Labored Mildly Severely	☐ Mask ☐ C-Collar ☐ Medication Amt Route
□ Retractions □ Stridor □ Nasal Flaring	DO2 @ipm%Traction
Cough: Productive: Non-Productive	□ Splint
Lung Sounds: R L	
ADAMS, RODNEY	4 N 045Y
Wheezing 43328731 129-63-8	ETMC Tyler
Crackles IIII II III III III III III III III I	
Rhonchi	. 7 - 16
Decreased 43328731	
Absent	1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /
fital Signs: T: 107.7 P: 181 Regular R: 6 BP: 095/052	Nurse Signature:
fital Signs: T: 107.7 P: 181 Regular R: 6 BP: 095/052 Copy of OIG case to Litigation S	Nurse Signature:

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TY-ADAMS, RODNEY-Enc# 43328731-EMR-I-I-8/3/2012 ED Outside Medical Records-8/4/2012--ER0020-23pg

(Includes herbals, OTC meds, vitamins,	neutraceuticals)						Patient Copy
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Personal Meds: DSent to Phare	nacy: □Sent home	with		(name)		T	
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	·						
lospital Pharmacy Order: Comp	are Pre-Admission Med	dications with	Formular	y Medications.	Formulary medic	cations that are id	entical in form
nd content may be dispensed for the pre nedications:	-admission medications	s continued i	n the hosp	ital, EXCEPT, de	NOT dispense	substitutions for	the following
/accination Decision (Risk Assessment) _Pneumococcal vaccine	Dindicated		Indicated		Administer vacc	ine ner nrotocol	
Influenza vaccine	□Indicated		Indicated		Administer vacc		
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Medication Recor	nciliation		00019892		0104029459		8/3/2012
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(Includes herbals, OTC meds, vitamins, r	neutraceuticals)						Medical Records	
	ADMISSION					DISCHARG		
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Patient is Knowledgeable About	Home Meds:⊓Yes (TINOO Re	ate Date		{	(Provided	
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The second secon	List No	ew Medic	ations	to be taken				
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Hospital Pharmacy Order: Compand content may be dispensed for the pre- redications: /eccination Decision (Risk Assessment of	admission medications (completed on admission)	continued in	the hosp	ital, EXCEPT, d	o NOT dispense	substitutions for	entical in form the following	
Pneumococcal vaccine	□Indicated		Indicated		Administer vacc			
3influenza vaccine	□indicated	DNot	Indicated		Administer vacc			
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TY-ADAMS, RODNEY-Enc# 43328731-EMR-1-1-8/3/2012 ED Outside Medical Record /4/2012--ER0020-23pg

INITIAL ASSESSMENT FORM Palestine Regional Medical Center PRIORITY: Patient: ADAMS, RODNEY P#: L00104029459 46YRS MR#: L000199921 DOB: AGE: Sex: M **ESI-1** EDP: TOOTE, PAUL Worker's Comp: DATE: 08/03/2012 Emp. Referred: PCP: NO LOCAL DOCTOR Arrival Mode: EMS-OTHER Presentation Time: 19:14 Triage Time: 19:14 Weight: 220 lbs. 0 oz. 100.00 kgs. LMP: Last Tetanus: Height: Acc By: GUARDS Chief FEVER >101 (ADULT) Vital Signs Complaint: T: 107.7 R P: 181 Regular IN WITH FEVER UP TO 107, SEIZURE Brief R: Labored Assessment: 095/052 BP: 77 % RA 02: Pain Intensity Scale: 0 / 10 **NIGHT SWEATS HEMOPTYSIS** UNK UNK WEIGHT LOSS Pain Location: Unable to Rate UNK FEVER UNK **ANOREXIA** UNK MAMMOGRAM HISTORY UNK SMOKER UNK NAUSEA NO **VOMITING OR DIARRHEA** NO ABDOMINAL PAIN NO EAR ACHE NO NO SORE THROAT NO OTHER FAMILY MEMBERS ILL Sudden Onset: Refer to EMS Call Report. Pre-Hospital Treatment Pediatric Assessment Past Medical UNKNOWN ROONEY History: Allergies: NKDA-ETITIC TYLER Medicines: UNKNOWN, ALG Nurse Signature: Additional Notes: ş : Rev 07/30/09 Page 14 of 23 Copy of OIG case to Litigation Support on 04.19.2013 by ce. UNAUTHORIZED COPYING OR VIEWING PROHIBITED

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/4/2012--ER0020-23pg

I-STAT cTn1
Pt:L88184829459
Pt Name:

cTn1
1.59 name:

19:32 834U612
Operator ID: 882785811683232
Physician:

Lot Number: 102P121502214 Serial: 353711 Version: JAMS133A CLEV: A24 Custom: 00000000

PORTE RODNEY
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TY-ADAMS, RODNEY-Enc# 43328731-EMR-I-I-8/3/2012 ED Outside Medical Records-8/4/2012--ER0020-23pg

8/3/2012 7:59 FK FR:H: FAX TO: 19037311150 PAGE: 001 OF 001

American Teleradiology

Patient Name:

Referring Physician:

RODNEY ADAMS

DOB: DOS:

8/3/2012 7:43:00 PM

Patient ID:

199921 **TOOTE PAUL**

Institution: Palestine Regional Medi

CT Head without intravenous contrast

Clinical Indication: Altered mental status.

Technique: 5 mm axial noncontrasted images obtained from the skull base to the vertex.

Reference: No prior studies for comparison.

No focal parenchymal masses, acute intracranial hemorrhage, or acute territorial infarct. No hydrocephalus. No extraaxial fluid collections. Basal cisterns are maintained. Orbits and globes are unremarkable. Mild mucosal thickening within sphenoid and maxillary sinuses. Mastoid air cells are clear. No acute osseous abnormalities. Fluid present within the nasopharynx and oropharynx.

Impression:

No acute intracranial abnormalities.

PRELIMINARY REPORT ONLY; PLEASE FOLLOW UP ON FINAL REPORT

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Dr. Thomas J. O'Neill, M.D.

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Page 17 of 23

1-I-8/3/2012 ED Outside Medical Record. 4/2012--ER0020-23pg Admit: 08/03:12 L CR PAUL URBAN i-STAT cīni Pt:L80184029459 Pt Name:____ cīni 1.59 ng/al 19:32 83AUG12 Operator ID: 002785011603232 Physician: Lot Number: 102P121502214 Serial: 353711 Version: JANS133A CLEW: A24 Custom: 00000000 Copy of OIG case to Litigation Support on 04.19.2013 by ce. UNAUTHORIZED COPYING OR VIEWING PROHIBITED 28 00 TY-ADAMS, RODNEY-Enc# 4332873

R-I-I-8/3/2012 ED Outside Medical Record. /4/2012--ER0020-23pg

Palestine Regional Medical Center 2900 South Loop 256 Palestine, TX 75801 PAGE 1

Johnny L. Haley, MD

LAB RESULTS Broadcast REPORT

Name: ADAMS, RODNEY Acct#: L00104029459 Uni Reg: 08/03/12 Dis	Age/Sex: 46/M Lt#: L000199921 DOB: Status: REG 1		, PAUL URBAN						
Specimen: 0803; PAR: U00022S Req#: 00605006 Collected: 08/03/12-1925 By: PRNURSB Status: COMP Received: 08/03/12-1945 By: PRLABTDE Ordering Dr: TOOTE, PAUL URBAN									
Test	Result	Flag Reference	Verified						
UA DIPSTICK > UA COLOR > UA APPEARANCE > UA SPEC GRAVITY > UA PH	YELLOW CLEAR 1.015 9.0	YELLOW CLEAR	08/03/12-2001 08/03/12-2001 08/03/12-2001 08/03/12-2001						
UA GLUCOSE UA BILIRUBIN UA KETONES UA BLOOD UA PROTEIN UA UROBILINOGEN	NORMAL NEGATIVE NEGATIVE NEGATIVE NEGATIVE NORMAL NEGATIVE	NEGATIVE NEGATIVE NEGATIVE NEGATIVE NORMAL NEGATIVE	08/03/12-2001 08/03/12-2001 08/03/12-2001 08/03/12-2001 08/03/12-2001 08/03/12-2001 08/03/12-2001						



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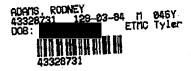
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Page 19 of 23

28.56

TY-ADAMS, RODNEY-Enc# 433287. R-I-I-8/3/2012 ED Outside Medical Record. ./4/2012--ER0020-23pg

RUN DATE: 08/03/12 RUN TIME: 1953 RUN USER: PRLABTDB		l Medical LAB *LIVE* en Inquiry	PAGE 1
PATIENT: ADAMS, RODNEY REG DR: TOOTE, PAUL UR	AGE/EX: 46	BED:	U #: L000199921 REG: 08/03/12 DIS:
SPEC #: 0803:PAR:H0006	28 COLL: 08/03/12-1930 RECD: 08/03/12-1945	STATUS: RES SUBM DR: TOOTE, PAUL UR	REQ #: 00605006
ENTERED: 08/03/12-194 ORDERED: CBC W/DIFF,	-	OTHR DR: NO LOCAL PHYS	
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		*	00/03/44 1333
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ндв	12.6	L 14.0-18.0 L 42-52 % 80-94 fL 27-31 pg	08/03/12-1953 gm/dL 08/03/12-1953 08/03/12-1953 08/03/12-1953 08/03/12-1953
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TY-ADAMS, RODNEY-Enc# 43328731 -I-1-8/3/2012 ED Outside Medical Records

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Page 21 of 23

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MERGENCY DEPA			Palestine Regi	onal Medical Center
REDICATION ADMIR	NISTRATION RECO		BODNEY	P#:L00104029459
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R-I-I-8/3/2012 ED Physician Documentatio. /4/2012--ER0014-5pg TY-ADAMS, RODNEY-Enc# 4332873 **ED Medication Orders** Patient: ADAMS, RODNEY ETMC-ER (EMR) Triage Date: August 3, 2012 1000 S. Beckham Ave. DOB: Sex: Male Tyler, TX 75701 Med Rec#: 1290384 Age: 45 yr 1-800-648-8141 Account#: 43328731 Time MEDICATIONS Tune Ativan mg IV mg IV Zofran Morphine mg IV Nubain mg iV Dilaudid _mg lV TKCL_ __mg IV Protonix _mg IV Nitrepaste _to chest wall Nitro S/Lx3 ASA_ mg po AIV Fluids U_cothr KVO Wild IZ NS □ LR ☐ Other IV Saline Lock 2/00, 8M 010 Wrem Nº 44 Ç. Physician's Signature: Page 1 of 1 Printed 8/3/2012 at 22:59 ADAMS, RODNEY (40 - 55 yr M) Medical Problem - Major Copy of OIG case to Litigation Support on 04.19.2013 by ce. UNAUTHORIZED COPYING OR VIEWING PROHIBITED Page 1 of 5 28 61

Plaintiffs' MSJ Appx. 5870

TY-ADAMS, RODNEY-Enc# 4332873: .-I-I-8/3/2012 ED Physician Documentation ./2012--ER0014-5pg ED Physician Notes Chart by exception. Circle positive responses - findings. A backstash (\) indicates a pertinent negative. Patient: ADAMS, RODNEY ETMC-ER (EMR) Triage Date: August 3, 2012 1000 S. Beckham Ave. DOB: Sex: Male Tyler, TX 75701 SYSTEM Med Rec#: 1290384 Age: 45 yr 1-800-648-8141 Account#: 43328731 Chief Complaint 1. Medical Problem - Major Basic Information / 54 _ # Hx Pt / Spouse / S.O. / Father / Mother / Child / Guardian / Interp / Other # Amb: BLS ALS # Police Vital signs: Per ny (\$\frac{1}{2} \text{fotas } 1 \text{ WNL } 1 \text{T} \text{P} \text{R} \text{BP} \text{R} \text{SaO2} \text{% } 1 Medications: Per riugge notes / None / Per tist / Reconciled / Per nulsing notes: substances reactions / NKDA / Allergies - intolerances: immunizations: Per nurse notes / Influenza / Pneumococcal / Tetanus: less_than_5 yrs 5-10 yrs more_than_10 yrs never / None / Clinical condition / Physical impairment / Cognitive impairment / Language barrier / History limitation: & AL tem 100. Rerom History of Present Illness fame frion Gell Anis 645 nech τ Duration/Timing _(1633) Kays wiks mos / Since date Symptom duration: time Symptom course: None / Resolved / Decreasing / Constant / Increasing / Episodic / Waxing & waning / Symptom onset: / Abrupt / Gradual / Until Dem / Location As noted / Describe / Symptoms: Quality/Severity Symptom quality: As noted / Describe / Modifying Factors Exacerbating: Norfe / Activity / " Mitigating: Ngrije / Rest / 💡 **Context** Prior similar symptoms: None / Describe / Assoc Signs & Symps Nego / Fewer / Chillis / Sweats / Malaise / Gen weakness / Decreased LOC / Review of Systems SegtHPI for - Const Eye: / R / L / Pain / Eyelic Inflammation / Conjunctival inflammation / Vision change / g / R_L_Ear pain disch / Nose: congestion disch bleed / Mouth: pain swelling / Throat pain swelling hoarse / ENT: CV: Resp; log / SOB at rest / SOB c exercise / Orthopnea / Cough / Wheezing / Stridor / Nausea / Poor PO intake: solids liquids / Vorniting / Hemalemesis / Diamhea / GI: Hematochezia / Constination / Melena / Pain / GU: Neg / Dysuria / Hematuria / Discharge / Lesions / R_L_Testicle: pain mass / Urine: decr incr / Neg / R / L / Hand / Shoulder / Arm / Knee / Leg / Neck / Back / General / Stilf / Pain / Chronic / Acute / MS: Skin N/Eg / Jaundice / Rash / Pruntus / Neg / Confusion / R_L_Hearing loss / R_L_Vision loss / Diplopia / Abni: speech motor sensation balance / HA / Seizure / / Anxiety / Depression / Mania / Ideation: suicidal homicidal delusional / Hallucinations / Psych: Endocrine Neg / Polydipsia /: Polyurfa / Heat - cold Intolerance / Cushingold / Neg / Lymphadenopathy / Easy bruising / Prolonged bleeding / Anemia / Hame/Lymph: / Allergies as noted / Recurrent infections / HtV: CO4# ___ . Viral Load Alleroy/immuno: Other significant: Alsystems otherwise neg / Past Medical History See HPI / See dictation / See med record dated __ ANG / CAD HTN Angina A.Fib MI CHF Mur / Asthma / GERD / CA / CRF / High chol / Hypothyroid / DM: type_1 type_2 / Med: Weg / Not significant / CABG x ___ / PTCA / Stent / Chole / Appy / Hemia / Suro: Page 1 of 2 Printed8/3/2012 at 22:59 copyright LYNX Medical Systems,Inc 2001 N10 ADAMS, RODNEY (40 - 55 yr M) Modical Problem - Major Copy of OIG case to Litigation Support on 04.19.2013 by ce. UNAUTHORIZED COPYING OR VIEWING PROHIBITED

-I-I-8/3/2012 ED Physician Documentation

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Chart by exception. Circle positive responses - findings. A backslash (\) indicates a pertinent negative. **ED Physician Notes** ETMC-ER (EMR) Patient: ADAMS, RODNEY Triage Date: August 3, 2012 1000 S. Beckham Ave. DOB: Sex: Male Tyler, TX 75701 Age: 45 yr 1-800-648-8141 Med Rec#: 1290384 Account#: 43328731 Family History Notegoacant / Asthma COPD / CAD / HTN / MI / DM / CA / Seizures / Unknown / FMH: Social History None / Neglect / Abuse / Living situation / Social concerns: Habits: Krone / ETOH: ooc reg amt_ per day wk / Tobacco: occ reg Marijuana 7 Cocaine / Heroin / Amphetamines / Examination Limited by: Clinical condition General: NAD / Mild distress / Mod distress (Sev distress Skin: Will / Pale / Jaundice / Cyanotic / Mottled / Diaphoretic / Ashen / Tenling / Erythema / Petechlae / Macules / Papules / Vesicles / mm cm / Discrete / Confluent / R / L / Hand / Arm / Lowerleg / Thigh / Face / Scalp / Trunk / Genitalia / Head Scalo: WARL / R / L / Occipital / Perietal / Temporal / Frontal / Enytherna / Brutses / Swelting / Tendemess / Face Whit I R / L / Infraorbital / Cheek / Maxilla / Ethmoid / Jaw / Enytherna / Bruises / Swelling / Tendemess / HOTIL / PERRL / Scienal Ictionus / Abril EOM / Nystagrmus: hor went / R_t_Lid Inflammation / Eye: 'R__I_Conjunctive inflammation / Abril pupil: R___ _ / R_i_Papiliedema / A - V nicking _ VKGL / R_L_TM: duti red bulging / R_L_Naris: congestion blood / Dry mucous membranes / Tongue: swelling bruising lesions / Pharynx erythema / R_L_Tonsii: swelling exudate / Absent gag / Neck MON. / Supple / Tenderness: spinous_process paraspinal / Enlarged thyroid / Stiffness / Painful ROM / WNL / Reg rate & rhythm / Bradycardia / Tachycardia / Extra beats / Irregular / S3 / S4 / Heart Systemur 6 est __ , rad to ___ _____ / Dias mur _____ /6 at _ Respirations: WAL / Slow / Rapid / Shallow / Labored / Retractions / Access. mus. use / Controlled vent. / WOL / Clear / Diminished / Rhonchi: insp exp Lungs: __/Rakes: coarse fine inspexp Wheezes: insp exp ... / Stridor: insp exp / Pleural rub: insp exp WDR. / Obese limiting exam / Soft / Scars___ Abd: ____ / Distended / Abril bowel sounds Guardino ___ / Rebound______ / Enlarged: liver spicen ___ ____ on / Mass Rectat WNL / Deferred / Tendemess_ _ / Hemorrhoids:____ / Prostate:_ Dim Mass_____ / Abni color: blood_streaked red black / Herne: pos neg q.c._ok / Decreased tone / Hen O WBIL / Enythema / Vesicles / Discharge / Tendemess / Ulicer / Mass_ Genital: ____cm / R / L / Glans / Shaft / R_L_Scrotum / Testis / Inguinal / Back: KBAL / R / L / Tijoracic / Lumbar / Michine / Paraspinous / CVA / Abrasion / Tendemess / **Extremities**: 1994L / R / L / Hand / Arm / Foot / Ankle / Lowerleg / Thigh / Tender / Swelling / Deformity / Edema __ Neuro: WNL / Alert / Ox_____ / Decr LOC / Cognifive diplixinction / Abni CNS II-XII / Aphasia - Dysarthria / Motor deficiti/ Sensory deficit / Abril cerebellar tests / Abril galt / Appropriate / 🗗 Depressed / Anxious / Agitated / Uncooperative / Combative / Psych: Lymph: MOR. / R / L / Ant / Post / Neck / Avillary / Inquinal / Generalized / Enlarged: min mod ___ __cm / Tender: mild mod sev / Non-tender / WNL / Warm x-4 / Rad: (___ / ___) / Femoral: (____ / __ Perfusion (R/L): _) / Pop:(_ 11 COOL perpung. D. Pedis: (___ / ___) / Post-lib: (___ / ___) / Cap ref: (__secs/__secs) / Critical care: Critical Care Note: System at risk for life threatening failure: /CNS) / Upper armay / Respiratory / Carolice / Circuladory / Hepatic / Renal Hypertension / Hypotepsion / Shigor / Hypercarble / Hypoxla / Blaeding / Dehydration / Associated problems: Metabglic@Aanoes / Actions / Arrhythmia / Infection / Post OP / Drug ovedose / Trauma / Time (mins) 1 Procedures/Services** ---- Cerdiec monitor interp / Venipuncture / Arterial Puncture CKR interp / NO placement / Vent management / Transcutaneous pacing / Delibrillation 2 Management: - Beliside management / Coat feview / Record review / Case discussion related to eritical care / Case discumentation / Net Orlical Care time (1 + 2) 75 ** Exclusive of separately billed procedures (ET intubation, temporary transvenous pacing, elective cardioversion, chest tube, CPR, pericardiocentesis, tracheostomy, cricothyroldotomy, thrombolysis, IO line, central line, EKO interp) Physician Signature Page 2 of 2 Printed8/3/2012 at 22:59 copyright LYNX Medical Systems, Inc. 2001. N10 **ED Physician Notes** ADAMS, RODNEY (40 - 55 yr M) Medical Problem - Major Copy of OIG case to Litigation Support on 04.19.2013 by ce. Page 3 of 5

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MR-I-I-8/3/2012 ED Physician Documentation-8/4/2012--ER0014-5pg TY-ADAMS, RODNEY-Enc# 433287 **ED Physician Notes** Chart by exception. Circle positive responses - findings. A backslash (\) Indicates a pertinent negative. Patient: ADAMS, RODNEY ETMC-ER (EMR) Triage Date: August 3, 2012 1000 S. Beckham Ave. DOB: Sex: Male Tyler, TX 75701 1-800-648-8141 Age: 45 yr Med Rec#: 1290384 Account#: 43328731 **Additional Problem** 1. Arterial Line Placement Note Examination Limited by: Clinical condition / Antental line: Preprocedure Verification Arterial Line Placement Note: Indications: Continuous BP measurement / Repeated arterial blood sampling / Approach: R / L / Radiel - Allen stest neg / Brechiel / Dorsalls pedis / Femoral / Preparation: Topical Betadine / Sterile drapes / _ Anesthesia: None / 10% Lidocaine ___ ___mL_subQ in erea of placement / Technique: Percateceous / Cut down / Catheter size: 18 _ / Seldinger over wire / Transducer pulse wave: #Food / Poor / Post procedure distal CMS: Natimal / Unchanged / Decreased disculation / Weakness / Numbness / Patient tolerated procedure: Wall bloderately well / Poorly / 44 22 24 Page 1 of 1 Printed8/4/2012 st 1:06

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Page 4 of 5

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DAMS, RODNEY (40 - 55 yr M) Medical Problem - Major

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

DISCHARGE SUMMARY

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

DATE OF ADMISSION 08/03/2012

DATE OF DEATH 08/04/2012 at 1750 hours.

DISCHARGE DIAGNOSES

- 1. Heatstroke.
- 2. Disseminated intravascular coagulation secondary to above.
- 3. Respiratory failure requiring intubation and mechanical ventilation secondary to above.
- 4. Refractory shock.
- 5. Severe anemia.
- 6. Thrombocytopenia.
- 7. Severe coagulopathy.
- 8. Obtundation and severe brain injury.

CONSULTATIONS

Dr. Gary Gross, hematology/oncology.

OPERATIONS AND PROCEDURES

- 1. Central venous catheter insertion, right femoral vein.
- 2. Arterial catheter insertion, left radial artery.

DESCRIPTION

This 45-year-old white male who was confined to TDCC in Palestine area apparently developed severe hyperpyrexia with a temperature of 107.8 and had collapsed at the prison. He was found having seizure-like activity by the inmates. Apparently, he was retrieved by ambulance and taken to Palestine where his initial temperature was 107.8. He was intubated somewhere en route and stabilized., and then transferred here for higher level of care.

Upon arrival, he was severely "shocky". He was started on vasopressor therapy and admitted to the intensive care unit. He developed a severe coagulopathy and diffuse oozing from all orifices. His hemogram was severely abnormal. He was treated with broad spectrum antibiotic coverage

DISCHARGE SUMMARY Page 1 of 2

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Page 1 of 2

TY-ADAMS, RODNEY-Enc# 4332873: .-I-I-8/3/2012 eDischarge Summary-8/4/201 avid I. Jones, MD-DC0002-1pg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS DISCHARGE SUMMARY

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

and he had been cooled adequately prior to admission.

He had severe neurologic injury and never regained consciousness. He remained in refractory shock throughout his hospital stay. He received a large amount of blood product and Dr. Gross was consulted to help with his evaluation.

His mother, the closest relative, indicated that she wanted no further resuscitative efforts late in the day after a large number of blood products were administered and the patient was showing no evident recovery. With that in mind, Dr. Gross and I determined that all ongoing care was futile, and therapy was stopped, specifically vasopressors and then mechanical ventilation, and he expired and was pronounced dead at 1750 hours.

.cc:

TR: kxj JOB#: 111877917

DD: 08/04/2012 05:51 P DT: 08/04/2012 07:02 P

DISCHARGE SUMMARY

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Page 2 of 2

TY-ADAMS, RODNEY-Enc# 43328731 -I-I-8/3/2012 eFacesheet-8/3/2012--FA000. _g

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East Texas Medical Center TYLER
                                           ADMISSION RECORD-0100
Name-ADAMS, RODNEY

DOB-MARKET AGE-045Y Sex-M Race-W

Acc#-00043328731 Med Rec 129-03-84 Admit Date&Time-08/03/2012 23:52

PatientType-I MedSrv-EMR NurseStation-POD1 Room#-M10 - A UserID-TY SMIK
Address-PO BOX 6400
                             CtystZip-TENNESSEE COLONY, TX 75861
Home Phone Number-903-9283118 County-ANDERSON Employer-INFORMATION NOT COLL Occupation-
Admitting Doc-(43697)DIX-EMPERADOR, LI Attending Doc-(43697)DIX-EMPERADOR, LI
Name-ADAMS, RODNEY
                          Relation-SELF
                                      Phone903-9283118
Address-PO BOX 6400
                          CityStZip-TENNESSEE C, TX 75861
Employer-INFORMATION NOT COLL
                          Phone-
******************** Emergency Contact1 *********************
Name-
                          Relation-
Address-
                          CityStZip-
Name- TDCJ, GURNEY UNIT
                          Relation-OTHER
Address-PO BOX 6400
                          CitystZip- TENNESSEE COLONY, TX 758
Name- UTMB CORRECTIONAL MANAGED CARE Number- 1960 Phone-
Address- DIBOLL P-P-DIBOLL
                            CityStZip-GALVESTON, TX 775551008
Subscriber- ADAMS, RODNEY
                            Soc-Sec-Num-
Group#- DOS08032012
                            Policy#-1797921
Number-
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Page 1 of 1

TY-ADAMS, RODNEY-Enc# 43328731 -I-I-8/3/2012 eHistory and Physical Repo. /4/2012-Lisa M. Dix-Emperador, MD-HP0007-lpq

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS
HISTORY AND PHYSICAL

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Lisa M. Dix-Emperador, MD ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

DATE OF ADMISSION 08/03/2012

HISTORY AND PHYSICAL

The patient was seen in the emergency room. The patient actually was transferred from an outlying institution. The patient actually is a 45-year-old white male who was actually incarcerated and was found down. By the time the patient had presented to the emergency room locally he apparently had a core temperature of 108 and was unresponsive. The patient was then stabilized. He was intubated, had IV fluid resuscitation. Continued to have an increased temperature of 108 and was completely unresponsive. In speaking with the police officers that were with him, they state that the patient was in a transfer facility and apparently 54 other inmates were there. Apparently the patient was up and about and had gotten something to eat and came back. He said he was a little bit dizzy and wanted to change up bunks and then when he went to lie down, they state that about 30 minutes later they found him seizing and then he became unresponsive.

PAST MEDICAL HISTORY, FAMILY HISTORY, SOCIAL HISTORY Inability to obtain. As far as medical records as to whether this patient has any other history of hypertension or diabetes, no records were brought over from the transfer unit.

DATA

As far as his data, he did have a CT scan of his head and this was at 7:43 p.m. at the other institution which showed no intracranial bleed. No masses. There was no old CT for comparison. He had a tox screen there that was negative for marijuana, amphetamines, PCP, cocaine.

LABORATORY DATA AT THE OUTLYING INSTITUTION
Hemoglobin 12.6, hematocrit 37.9, platelet count 183. Platelets estimate were adequate. He had 33 segs, 1 band, 57 lymphs, 4 monos. The patient had a sodium of 131, potassium 5.9, chloride 98. CO2 23, anion gap 14.9, BUN 24, creatinine 2.2, total protein 7, albumin 3.0. Calcium 7.3, AST 40, and ALT 30. He had an alk phos of 117, CK 165. Osmolality calculated was 274, CK-MB 0.8. ETOH was less than 10.

PHYSICAL EXAMINATION

HISTORY AND PHYSICAL Page 1 of 4

Page 1 of 4

TY-ADAMS, RODNEY-Enc# 43328731-MD-HP0007-1pg

-1-1-8/3/2012 eHistory and Physical Repor

'4/2012-Lisa M. Dix-Emperador,

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

HISTORY AND PHYSICAL

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Lisa M. Dix-Emperador, MD ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

VITAL SIGNS: Basically, the patient on arrival here, temperature core was still up at 104. The patient was intubated. He had what looks like a traumatic intubation because he had a lot of increased blood about his orifice. He was saturating at 95% to 100% on a ventilator. The patient is unresponsive with dilated pupils bilaterally. Core temperature is still up at 104.

HEENT: Cervical collar is in place.

LUNGS: Diminished breath sounds throughout but clear. No rhonchi, no

wheezes.

ABDOMEN: Benign.

RECTAL: Foley was in place.

SKIN: There was no evidence for ecchymotic areas or contusions of the

abdomen.

EXTREMITIES: Are cool, pale.

GENITALIA: He has a Foley catheter in place. Urine is actually light in

color and no real evidence for infection.

He did have an EKG in the outlying institution that showed supraventricular tachycardia at 189 beats/minute. A followup EKG monitor here still shows sinus tach at 110. Followup EKG is ordered.

LABORATORY DATA SINCE HE ACTUALLY ENDED UP HERE AT THIS INSTITUTION

Followup CT is pending. The patient has a rectal temperature of 104.4. Pulse is still 168. Blood pressure is 96/61; 100% saturation on current settings. His ABG on arrival: pCO2 of 45, pO2 of 90.6, total hemoglobin 1.4, sodium 34.7, potassium 5.0. Laboratory data significant for creatinine kinase now at 11:23 p.m. of 13.21. CK-MB of 16.8%, troponin of 38. He has a BUN of 31, creatinine 1.5, AST 271. He has bilirubin of 1.8, direct bilirubin of 0.85. He has total protein of 5.8, albumin 2.7, calcium 6.6. He has a white blood count now of 19.8, hemoglobin 11.5, platelet count of 57, bands of 12 and enucleated red blood cells of 10. The patient is still unresponsive.

The patient was treated with Zosyn in the emergency room.

ASSESSMENT AND PLAN

1. Mental status. The patient was noted to be seizing. At this point the patient is unresponsive. Both pupils are dilated. Patient with significantly elevated core temperature at 108. Questionable if this

HISTORY AND PHYSICAL Page 2 of 4

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Page 2 of 4

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TY-ADAMS, RODNEY-Enc# 43328731- I-I-8/3/2012 eHistory and Physical Repoi 4/2012-Lisa M. Dix-Emperador. MD-HP0007-lpq

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS HISTORY AND PHYSICAL

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Lisa M. Dix-Emperador, MD ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

patient had a stroke, heat stroke, and then seizure, and then subsequent unresponsiveness. The first CT of the head was unremarkable. There was no evidence for brain swelling. At this point in time, the patient has had a significant amount of fluid resuscitation, so a followup CT without contrast has been initiated. Consult was also made to PSOT; was called in when the patient came in at 11:00 to this institution by Dr. Marino with Christine Porter being called.

- 2. Acute renal failure noted with elevation of his BUN and creatinine. Will continue IV fluid resuscitation. the patient will have his followup CT of the head.
- 3. Gastrointestinal. Patient with elevated transaminases consistent with shock liver. In addition, patient with DIC panel positive for _____ product from the patient most likely with multi-organ system shutdown.
- 4. Elevation of cardiac enzymes again, most likely with shocky organ systems. Will plan for an echo in the morning and evaluate LV-function, and when the patient has dilated, cardiomyopathy.
- 5. As far as his neuro status, will have neuro checks and then will also plan for an EEG in the morning to assess brain function.
- 6. Rectal Foley is in place, continue.
- 7. Supraventricular tachycardia noted. Could this patient have presented—with a supraventricular tachycardia and then with decreased blood pressure? Will plan to have to have a followup EKG now if he is still having increased significant tachycardia. Will plan to go head and start a Cardizem drip.
- 8. Since there is some significant acidosis followup ABG with pH now of 7.15. Patient will be treated with 2 amps of bicarb. An ABG will be rechecked.

The family has now appeared and we will talk to the family before the patient goes up.

cc:

TR: dff

JOB#: 111877202

HISTORY AND PHYSICAL Page 3 of 4

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EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

HISTORY AND PHYSICAL

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

Lisa M. Dix-Emperador, MD ADMIT DATE: 08/03/2012 23:52

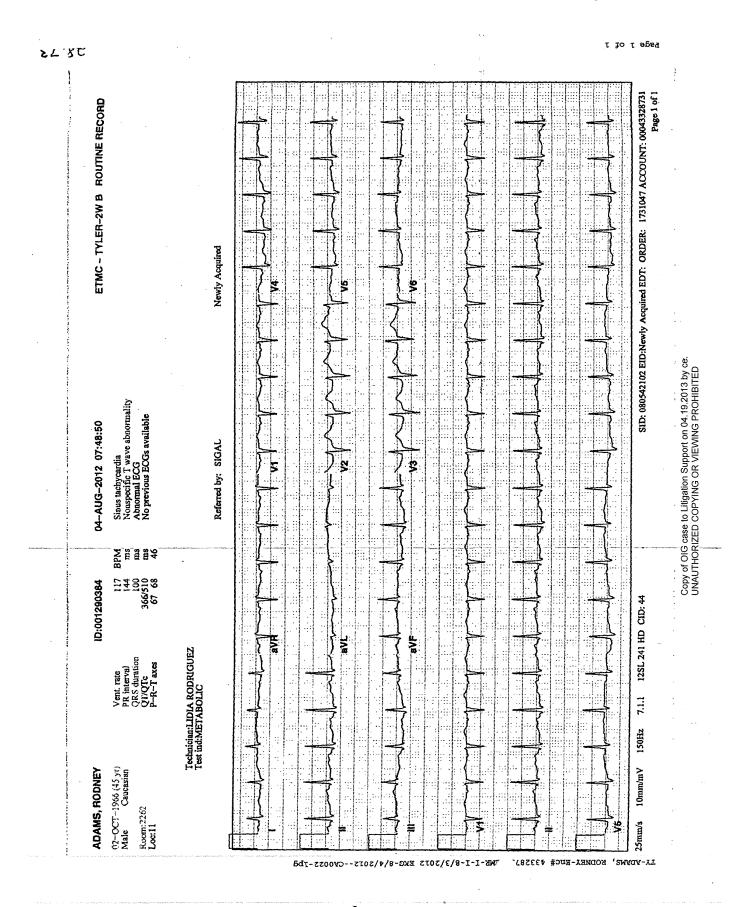
DISCHARGE DATE:

DD: 08/04/2012 01:04 A DT: 08/04/2012 03:32 A

HISTORY AND PHYSICAL

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Page 4 of 4



TY-ADAMS, RODNEY-Enc# 4332873. R-I-I-8/3/2012 ePhysician Progress Note-8/-/2012-David I. Jones, MD-PN0014 1pg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER,

TYLER PROGRESS NOTES

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

DATE OF PROGRESS NOTE

08/04/2012

SUBJECTIVE

The patient has continued to do poorly all afternoon. His blood pressure has drifted down. He is now on multiple pressors including epinephrine, still with marked hypotension and shock.

OBJECTIVE

He has received a huge amount of blood products throughout the day and even after all that, his hemoglobin is back down to 5, his platelets are at 60,000, and his coags still are markedly abnormal. He continues to ooze diffusely. Neurologically he showed no significant change and is unresponsive.

ASSESSMENT

I have discussed this with his mother who requests that all efforts be stopped and he be allowed to die. I concur with that given the severity of his condition and the likelihood of death. I have discussed this with Dr. Gross who also concurs regarding futility of care.

PLAN

With that in mind, we will stop all pressors and then stop mechanical ventilation. Do Not Resuscitate status has already been issued, and all therapies will be stopped at this time.

cc:

TR: mah JOB#: 111877881

DD: 08/04/2012 04:58 P DT: 08/04/2012 05:06 P

Signed by JONES MD, DAVID I on 04-Aug-2012 17:42:54 -05:00

TYLER PROGRESS NOTES
Page 1 of 2

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Page 1 of 2

TY-ADAMS, RODNEY-Enc# 43328731.

I-I-8/3/2012 ePhysician Progress Note-8/

12-David I. Jones, MD-PN0014-1pg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS
TYLER PROGRESS NOTES

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

TYLER PROGRESS NOTES Page 2 of 2

Page 2 of 2

TY-ADAMS, RODNEY-Enc# 43328731. I-I-8/3/2012 ePhysician Progress Note-8,

MD-PN0014-lpq

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS TYLER PROGRESS NOTES

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

The patient remains critically ill. I saw him at 0245 hours last night for quite some time and then I am seeing him again today. He remains critically ill.

PHYSICAL EXAMINATION

GENERAL: Currently, he is on mechanical ventilation and is severely ill. VITAL SIGNS: His temperature dropped to the 94.5 range. Blood pressure is 100/82 with a heart rate of 115 and respiratory rate of 24 on mechanical ventilation. He is quite edematous and has multiple areas of contusion and bleeding. He is bleeding from different orifices and these are addressed with a tamponade of some sort.

SKIN: Warm and dry without rash.

HEENT: Endotracheal tube and nasogastric tube with bleeding around the area and around the mouth. He has his nasal tamponades or tampons.

NECK: Supple, but he is still in a cervical collar.

CHEST: Reveals a few scattered crackles, but otherwise was clear.

HEART: Regular rhythm and rate without murmur, rub or gallop, but tachycardic.

ABDOMEN: Large, obese, nontender.

GENITOURINARY: Foley catheter.

EXTREMITIES: Mildly edematous. There is significant swelling of the right forearm, but no evidence of compartment syndrome at this time with good pulses.

NEUROLOGIC: Reveals him to be minimally responsive. He is initially fixed and dilated, but his pupils now have been reduced to 2 to 3 mm and they are reactive. Neurologically I can get no other response from him.

CURRENT VENTILATOR SETTINGS

Assist control of 22, tidal volume 650, PEEP of 5, FiO2 0.50.

FLUIDS

Include D5W at 80, Levophed at 30 mcg/kg/min, _____ at 290 mcg/kg, _____ 0.04 units per minute and a Protonix drip.

CURRENT LABORATORY

Quite abnormal with a recent blood gas with pH 7.16, pCO2 of 48, PO2 of 300. CPK is elevated at 1355 with a troponin of 35. INR is greater than 34 and D-dimer is greater than 69,000. Hemoglobin is reduced to 11 after transfusion; it was 6.9 earlier.

TYLER PROGRESS NOTES
Page 1 of 2

Page 1 of 2

I-I-8/3/2012 ePhysician Progress Note-8,

112-David I. Jones, MD-PN0014-1pg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS

TYLER PROGRESS NOTES

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

SUMMARY

He remains severely and critically ill. His overall prognosis is extremely poor and this has been communicated to the family. I will order labs. I will ask Dr. Gary Gross, hematology/oncology, to see him today regarding help with his coagulopathy.

The cause of this is unclear. It looks like this may be all related to heat stroke, given his initial temperature of 107.9. I do not find evidence at this time to suggest neuroleptic malignant syndrome or TTP. There is no indication of poisoning at this time. I suspect that this is all a consequence of hyperpyrexia initiating a sepsis-type cascade with severe coagulopathy and resultant findings. His overall prognosis once again, it quite poor, but at this time we will continue in the short term. I will discuss this with his family.

Critical care time 40 minutes.

cc:

TR: kmb JOB#: 111877581

DD: 08/04/2012 11:21 A DT: 08/04/2012 01:42 P

Signed by JONES MD, DAVID I on 04-Aug-2012 17:42:56 -05:00

TYLER PROGRESS NOTES Page 2 of 2

Page 2 of 2

-I-I-8/3/2012 ePulmonary Report-8/4/2012

id I. Jones, MD-TH0001-1pc

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS
PULMONARY

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

DATE OF PROCEDURE 08/04/2012

PROCEDURE PERFORMED

Right femoral triple lumen central line placement.

TECHNIQUE IN DETAIL

After informed consent, the patient's right femoral region was prepped and draped in the usual sterile fashion. 1% Xylocaine was used for local anesthesia. Using the modified Seldinger technique, the right femoral vein was cannulated without difficulty. A guidewire was placed and the needle was removed. Over the guidewire, a dilator was placed. This was then removed and a triple lumen catheter was placed over the guidewire into position without difficulty. The guidewire was removed. All ports were aspirated and flushed. The catheter was then sutured into position. Sterile dressing was applied. The patient tolerated the procedure well.

Procedure was performed by Dr. David Jones with adequate placement of a right femoral triple lumen. Sutured in place without any difficulty. No complications.

Dictated by Christine Porter, ACNP

cc:

TR: ddp JOB#: 111877211

DD: 08/04/2012 03:47 A DT: 08/04/2012 10:33 A

Signed by JONES MD, DAVID I on 04-Aug-2012 17:42:58 -05:00 PULMONARY

Page 1 of 2

Page 1 of 2

R-I-I-8/3/2012 ePulmonary Report-8/4/201

.vid I. Jones, MD-TH0001-1pg

EAST TEXAS MEDICAL CENTER REGIONAL HEALTHCARE SYSTEM, TYLER, TEXAS
PULMONARY

ADAMS, RODNEY

MR#: 1290384 ACCOUNT #: 00043328731

David I. Jones, MD

ADMIT DATE: 08/03/2012 23:52

DISCHARGE DATE:

PULMONARY Page 2 of 2

Page 2 of 2

TY-ADAMS, RODNEY-Enc# 4332873 R-I-I-8/3/2012 eRadiology Report-8/3/201. Chest 1 View-RA0001-1pg

East Texas Medical Center

Imaging Services Consultation

1000 South Beckham Tyler Texas. 75701 * (903) 531-8200

Page 1

PATIENT NAME: ADAMS, RODNEY

ADAMS, RODNEÝ

MRN: 000001290384

ACCESSION#: 6430992

ADAMS, RO SEX: MALE AGE: 45

5 DATE OF BIRTH:

NS#: POD1

BED: M10 A

PATIENT TYPE (Major/Minor): E / E

ACCT#: 43328731

Preliminary Report

Order Num 90001 by COLIN MARINO on Aug 3 2012 11:00PM

PROCEDURE: XR Chest 1 View

REASON FOR PROCEDURE: PALPITATIONS
PROCEDURE DICTATED: CHEST ONE VIEW

INDICATIONS: Palpitations.

RESULTS: Upright chest reveals endotracheal tube and nasogastric tube are in good position. Linear atelectatic changes are seen in both bases. No pneumothorax is seen. Pulmonary vascularity is normal.

IMPRESSION:

Linear atelectatic changes at both bases. No dense consolidation seen.

Endotracheal tube and nasogastric tube are in good position.

Accession Number: 6430992

Interpreting Physician: JOHN P ANDREWS MD ID#: 000380

Dictated on: Aug 3 2012 11:14PM Transcribed by / Date: on

Approved Electronically by / Date:

Distribution:

COLIN MARINO, M.D.

ID#: 005219

END OF REPORT

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Page 1 of 1

.-I-I-8/3/2012 OneChart ED Nursing Assess.

J-8/4/2012--ER0012-1pg

Assessment Report

Pt Name: Pt ID:

ADAMS, RODNEY 2012058566

DOB:

Adm Date: Dsch Date:

Entity:

Dx:

Temperature

Entity: Tyler

Pt Name: ADAMS, RODNEY

Adm Date: 08/03/2012

08/03/2012

0100 - Tyler

MRN: Acct No: 1290384 00043328731 45Y/M

Age/Sex: Atn Dr:

DIX, LISA MD

BB Bunking Courses in the first 08/04/12 08/04/12 08/04/12 08/04/12 08/03/12 08/03/12 02:12 22:56 00:38 00:16 Hili Amanda B RN Hill|Amanda|B|RN Hili Amanda BIRN H#IjAmandajBjRN Hill|Amanda|B|RN Collected By Hill|Amanda|B|RN Clinical Note Complete Complete Status Complete Complete Complete Complete 08/03/2012 08/03/2012 08/03/2012 08/03/2012 08/03/2012 08/03/2012 ED Room Placement Date IV Prior to Arrival 1 Yes Chief Complaint ŤΧ ΤX TΧ TΧ TX HYPERTHERMIA/MI HYPERTHERMIA/MI/ HYPERTHERMIA/MV HYPERTHER MIA/MI/ HYPERTHERMIA/MI/ HYPERTHERMIA/MI /SEIZURE SEIZURE SEIZURE SEIZURE SEIZURE /SEIZURE IV1 - Type Saline Lock Saline Lock Saline Lock Unable to assess Yes Yes patient **Chief Complaint** TX TX HYPERTHERMIAMI HYPERTHERMIA/MI/ HYPERTHERMIA/MI/ HYPERTHERMIAMI **HYPERTHERMIA/MI** HYPERTHERMIA/MI SEIZURE SEIZURE SEIZURE SEIZURE /SEIZURE /SEIZURE Location Right Right Right Antecubital Antecubital Antecubital BP 96/61 Pulse 168 'HH' Size 20G 18G Respirations 14 O2 Saturation (%) 100 IV Prior to Arrival 2 Yes O2 Delivery Device Ventilator Mode of Arrival Adm Air Transport Non - ETMC IV #2 Type Saline Lock Saline Lock Accompanied By Self

MRN: 1290384

Page 1 of 3

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Page 1 of 3

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Assessment Report

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TY-ADAMS, RODNEY-Enc# 4332873:

.-I-I-8/3/2012 OneChart ED Nursing Assess _-8/4/2012--ER0012-1pg

MRN:

Acct No:

Age/Sex:

Atn Dr:

1290384

45Y/M

00043328731

DIX, LISA MD

Assessment Report

Pt Name: Pt ID:

Entity:

Pt Name: ADAMS, RODNEY

Adm Date: 08/03/2012

Entity: Tyler

Dx:

ADAMS, RODNEY

2012058566 DOB:

08/03/2012

Adm Date: Dsch Date:

0100 - Tyler

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	02:17	02:12	00:38	00:16	23:00	22:56
Collected By	Hill Amanda B RN	Hill Amanda B RN	Hiii Amanda B RN	Hill Amanda B RN	HilljAmanda B RN	Hiti Amanda B RN
Clinical Note						
Status	Complete	Complete	Complete	Complete	Complete	Complete
Site						Rectal
Location	Left				Left	
Historian					Paramedic/EMS Provider	_
Out of ED Date/Time				08/04/2012 01:00		
Patient Disposition				Intensive Care		
V#2 Site	Forearm				Antecubital	
Size	20G				18G	
Condition on Discharge				Stable	·	···
riage Level Key	1 - Resuscitation	1 - Resuscitation	1 - Resuscitation	1 - Resuscitation	1 - Resuscitation	1 - Resuscitation
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	3 - Urgent	3 - Urgent	3 - Urgent	3 - Urgent	3 - Urgent	3 - Urgent
	4 - Semi-Urgent	4 - Semi-Urgent	4 - Semi-Urgent	4 - Semi-Urgent	4 - Semi-Urgent	4 - Semi-Urgent
	5 - Non-Urgent	5 - Non-Urgent	5 - Non-Urgent	5 - Non-Urgent	5 - Non-Urgent	5 - Non-Urgent
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D Room Placement ate	08/03/2012	08/03/2012	08/03/2012	08/03/2012	08/03/2012	08/03/2012
dmit Room No.				2262		
ocation		Radial, Left			**************************************	
sertion Date		08/04/2012				
ubing Date		08/04/2012		<u> </u>	A	
te Appearance		No complications				

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Generated By: EDR

MRN: 1290384

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R-I-I-8/3/2012 OneChart ED Nursing Assess....nt-8/4/2012--ER0012-1pg

MRN:

Assessment Report

Pt Name: Pt ID:

ADAMS, RODNEY

2012058566 DOB:

08/03/2012

Adm Date: Dsch Date:

Entity: 0100 - Tyler

Dx:

00043328731 Acct No: 45Y/M Age/Sex: Atn Dr:

DIX, LISA MD

1290384

	08/04/12	08/04/12	08/04/12	08/04/12	08/03/12	08/03/12
	02:17	02:12	00:38	00:16	23:00	22:56
Collected By	Hill Amanda B RN	H湖[Amanda B]RN	H#IAmandajBjRN	Hili Amanda BIRN	HillAmandajBjRN	HilljAmandajBjR1
Clinical Note						
Status-	Complete	·Complete	Complete	Complete	Complete	Complete
Dressing		Intact				
Action/Comment		PLACED BY DR.				
		MARINO				
Unit Called	•			Yes		
Pre-Hospital General		*			See EMS Report	
Treatment						
liotor Response					Localizes to Pain	

Pt Name: ADAMS, RODNEY Entity: Tyler

Adm Date: 08/03/2012

Page 3 of 3

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Page 3 of 3

Assessment Report

MRN: 1290384

TY-ADAMS, RODNEY-Enc# 4332873: :-I-I-8/3/2012 OneChart ED Physician Orde 3/4/2012--ER0037-lpg

Orders Report

Pt Name: Pt ID: DOB: Adm DTime: Dsch DTime:	ADAMS, RODNEY 2012058566 08/03/2012	MRN: Acct No: Age/Sex: Atn Dr:	1290384 00043328731 45Y/M DIX, LISA MD
Entity:	0100 - Tyler		

Order Type: Admit/Discharge/Transfer Order Sub Type: Admission

Dx:

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034189	08/03/12 23:38	Admitting Physician - dix	Active	COLIN A MARINO, MD
	08/03/12 23:38	• •		
Instructions: di	x			
2034337	08/03/12 23:38	Admit To Medical/Surgical ICU	Active	COLIN A MARINO, MD
	08/03/12 23:38			

		 · · · · · · · · · · · · · · · · · · ·	 	
Order Type: Cardiology				
Order Sub Type: Echo	·			

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034702	08/04/12 00:24	Echocardiogram Complete	Complete	LISA M DIX, MD
	08/04/12 00:24	4		

Order Type: Cardiology Order Sub Type: EKG

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034188	08/03/12 23:27	EKG STAT Palpitations	Active	COLIN A MARINO, MD
	08/03/12 23:27	•		
2034703	08/04/12 00:24	EKG Metabolic Abnormalities	Active	LISA M DIX, MD
	08/04/12 00:24			

Order Type: Clinical Order Sub Type:

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034336	08/03/12 23:38	Diagnosis - ams, hyperthermia, dic,	Active	COLIN A MARINO, MD
	08/03/12 23:38			
Comments: am	ıs, hyperthermia, dic,		•	
2034559	08/04/12 00:24	Diagnosis - DIC, hyperthermia coma	Active	LISA M DIX, MD
	08/04/12 00:24			
Comments: Did	: hyperthermia coma	ea.		

Order Type: Code Status

Order Sub Type: Code_Status

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By	
2034340	08/03/12 23:38	Code Status Full Code	Active	COLIN A MARINO, MD	
	08/03/12 23:38				
2034560	08/04/12 00:24	Fuli Code	Active	LISA M DIX, MD	
	08/04/12 00:24	\$** \$**			

	•		
Pt. Name: ADAMS, RODNEY	i.j	MRN: 1290384	Orders Report
Entity: Tyler	:	Page 1 of 8	ORE_X0AQ_0149_DSCH_LYNX.rpt version v1.00
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Page 1 of 8

TY-ADAMS, RODNEY-Enc# 4332873. 2-I-I-8/3/2012 OneChart ED Physician Orde 8/4/2012--ER0037-1pg

Orders Report

Pt Name:

ADAMS, RODNEY

MRN:

1290384

Pt ID:

2012058566

00043328731 Acct No:

DOB:

45Y/M Age/Sex:

Adm DTime:

08/03/2012

Atn Dr:

DIX, LISA MD

Dsch DTime:

Entity:

0100 - Tyler

Dx:

Order Type: Consult

Order Sub Type: Specialist Service Request

Ord No Str / End DTime Order as Written 08/04/12 01:18 2034911

Ord Status Consult: Gritical Care - DAVID I JONES, MD called to C Active

Signed-By / Co-Signed By LISA M DIX, MD

08/04/12 01:18

Instructions: called to Christine Porter at 11pm by Dr. Moreno from ER

Order Type: Dietary

Order Sub Type: Oral

Ord No	Str / End DTime	Order as Written		Ord Status	Signed-By / Co-Signed By	
2034590	08/04/12 00:24	Diet, NPO	.,	Active	LISA M DIX, MD	
	00/04/40 00:04					

Order Type: Laboratory

Order Sub Type: Chemistry

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2033979	08/03/12 22:38 08/03/12 22:38	Hepatic Function Panel (Liver) STAT	Complete	COLIN A MARINO, MD
2033982	08/03/12 22:36 08/03/12 22:36	CMP STAT	Complete	COLIN A MARINO, MD
2034186	08/03/12 23:27 08/03/12 23:27	CKMB (Includes CK,CKMB, Index) STAT	Complete	COLIN A MARINO, MD
2034187	08/03/12 23:27 08/03/12 23:27	Troponin-I STAT	Complete	COLIN A MARINO, MD
2034344	08/03/12 23:38 08/03/12 23:38	CKMB (Includes CK,CKMB, Index)	Canceled	COLIN A MARINO, MD
2034345	08/03/12 23:38 08/03/12 23:38	Troponin-i	Canceled	COLIN A MARINO, MD
2034511	08/04/12 05:30 08/04/12 05:30	CKMB (Includes CK,CKMB, Index)	in progress	
2034512	08/04/12 05:30 08/04/12 05:30	Troponin-l	In progress	
2034594	08/04/12 00:24 08/04/12 00:24	B-Type Natriuretic Peptide (BNP) STAT	Complete	LISA M DIX, MD
2034595	08/04/12 00:24 08/04/12 00:24	Lipid Profile STAT	Complete	LISA M DIX, MD

Order Type: Laboratory

Order Sub Type: Coagulation

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By	
			 		4-1-4

Pt. Name: ADAMS, RODNEY

MRN: 1290384

Generated By: EDR

Entity: Tyler Adm Date: 08/03/2012

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R-I-I-8/3/2012 OneChart ED Physician Orde. _-8/4/2012--ER0037-1pg

Orders Report

Pt Name: Pt ID: DOB:

ADAMS, RODNEY 2012058566

MRN: Acct No: Age/Sex:

1290384 00043328731 45Y/M

Adm DTime: Dsch DTime:

Entity:

Dx:

08/03/2012 0100 - Tyler

Atn Dr:

DIX, LISA MD

Order Type: Laboratory

Order Sub Type: Coagulation

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2033977	08/03/12 22:36	aPIT STAT	In progress	COLIN A MARINO, MD
•	08/03/12 22:36			
2033978	08/03/12 22:36	Prothrombin Time (PT) STAT	In progress	COLIN A MARINO, MD
	08/03/12 22:36	i .		
2033980	08/03/12 22:36	D-Dimer, Quantitative STAT	in progress	COLIN A MARINO, MD
	08/03/12 22:36	;		
2033983	08/03/12 22:38	Fibrinogen Degradation Products (FDP) STAT bleeding	Complete	COLIN A MARINO, MD
	08/03/12 22:38	[™] ¥		
		1		

Instructions: bleeding

Order Type: Laboratory

Order Sub Type: Hematology

Ord No	Str / End DTime	Order as Written	:	Ord Status	Signed-By / Co-Signed By
2033981	08/03/12 22:36	CBC STAT		Complete	COLIN A MARINO, MD
	08/03/12 22:36	•		• .	•
2034596	08/04/12 00:24	Sedimentation Rate STAT		Complete	LISA M DIX, MD
	08/04/12 00:24	•	•	1.0	

Order Type: Laboratory

Order Sub Type: Microbiology

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2033971	08/03/12 22:36 08/03/12 22:36	Culture, Blood STAT Prior to antibiotics	in progress	COLIN A MARINO, MD
2033972	08/03/12 22:36 08/03/12 22:36	Culture, Blood STAT Prior to antibiotics	In progress	COLIN A MARINO, MD
2033973	08/03/12 22:36 08/03/12 22:36	Culture, Urine STAT	In progress	COLIN A MARINO, MD
2034557	08/04/12 00:24 08/04/12 00:24	Culture, Blood	Canceled	LISA M DIX, MD
2034558	08/04/12 00:24 08/04/12 00:24	Culture, Blood	Canceled	LISA M DIX, MD
2034597	08/04/12 00:24 08/04/12 00:24	Culture, Blood STAT Prior to antibiotics	Canceled	LISA M DIX, MD
2034598	08/04/12 00:24 08/04/12 00:24	Culture, Blood STAT Prior to antibiotics	Canceled	LISA M DIX, MD
2034599	08/04/12 00:24 08/04/12 00:24	Gram Stain	In progress	LISA M DIX, MD

Pt. Name: ADAMS, RODNEY

MRN: 1290384

Orders Report

Entity: Tyler Adm Date: 08/03/2012 Page 3 of 8

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Orders Report

Pt Name: Pt ID:

ADAMS, RODNEY 2012058566

MRN: Acct No:

1290384 00043328731

DOB: Adm DTime:

Dx:

08/03/2012

Age/Sex:

45Y/M

Dsch DTime:

Entity:

0100 - Tyler

Atn Dr:

DIX, LISA MD

Order Type: Laboratory

Order Sub Type: Transfusion Services

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2033974	08/03/12 22:36	Type And Screen STAT	Complete	COLIN A MARINO, MD
	08/03/12 22:36		-	
2034130	08/03/12 23:23	Blood Product - Fresh Frozen Plasma (FFP) STAT A fa	Complete	COLIN A MARINO, MD
	08/03/12 23:23			
2034741	08/04/12 00:42	Blood Product - Fresh Frozen Plasma (FFP) dic A facto	In progress	LISA M DIX, MD
	08/04/12 00:42			•
2034742	08/04/12 00:42	Blood Product - Pheresis Platelet ASAP dic Bleeding In	Complete	LISA M DIX, MD
	08/04/12 00:42	1		

Order Type: Laboratory

Order Sub Type: Urinalysis

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034600	08/04/12 00:24	Urinalysis with Microscopic, if Indicated	in progress	LISA M DIX, MD
	08/04/12 00:24		•	

Order Type: Medication/IV Order Sub Type:

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034045	08/03/12 23:23	DEXTROSE 5%-WATER (250 ML bag) NOREPINEPH	Discontinue	
2034086	08/03/12 23:23	DEXTROȘE 5%-WATER (250 ML bag) NOREPINEPH	Discontinue	
	08/03/12 23:50			
2034347	08/03/12 23:38	Protonix 40mg/V Complex Dose Intravenous QD Now F	Active	COLIN A MARINO, MD
2034348	08/03/12 23:38	ONDANSETRON (ZOFRAN) 4 MG = 2 ML Intravenous	Validated	COLIN A MARINO, MD
2034621	08/04/12 00:20	PHENYLÉPHRINE 60 MG IN SALINE (250 ML bag) In	Validated	
	08/04/12 00:20	10		
2034622	08/04/12 00:21	SODIUM BICARB 8.4% ABBOJECT 100 MEQ = 100 M	Validated	
	08/04/12 00:21	* ************************************		
2034711	08/04/12 00:24	INSULIN, ASPART (NovoLOG) Sliding Scale Subcutan	Validated	LISA M DIX, MD
2034714	08/04/12 00:24	labetalol (laBETalol) 10 mg = 2 mL Intravenous Q1H PF	Active	LISA M DIX, MD
2034717	08/04/12 00:24	ONDANSETRON (ZOFRAN) 4 MG = 2 ML Intravenous	Validated	LISA M DIX, MD
2034745	08/04/12 00:42	dextrose 5% in water (D5W) (1000 mL bag) sodium bic	Active	LISA M DIX, MD
2034751	08/04/12 00:42	sodium bicarbonate (SODIUM BICARB 8.4% ABBOJE(Active	LISA M DIX, MD
	08/04/12 00:42	•		
2034884	08/04/12 01:35	DEXTROSE 5%-WATER (250 ML bag) EPINEPHRINE	Validated	
	08/04/12 01:35			÷
2035039	08/04/12 02:14	NOREPINEPHRINE (LEVOPHED) 4 MG = 4 ML Intraw	In progress	
	08/04/12 02:14		*	

Pt. Name: ADAMS, RODNEY

MRN: 1290384

Orders Report

Entity: Tyler Adm Date: 08/03/2012 Page 4 of 8

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3/4/2012 -- ER0037-1pg TY-ADAMS, RODNEY-Enc# 4332873: -I-I-8/3/2012 OneChart ED Physician Orde Orders Report ADAMS, RODNEY 1290384 Pt Name: MRN: 2012058566 00043328731 Pt ID: Acct No: DOB: Age/Sex: 45Y/M 08/03/2012 DIX, LISA MD Adm DTime: Atn Dr: **Dsch DTime:** Entity: 0100 - Tyler Dx: Order Type: Medication/IV Order Sub Type: Ord No Str / End DTime Order as Written Ord Status 2035086 08/04/12 02:15 VANCOMYCIN 1000 MG = 1 VIAL Intravenous ONCE: In progress 08/04/12 02:15 2035087 08/04/12 02:16 PHENYLEPHRINE (NEOSYNEPHRINE) 50 MG = 5 ML in progress 08/04/12 02:16 2035088 08/04/12 02:17 PHYTONADIONE (AQUAMEPHYTON) 10 MG = 1 ML | In progress 08/04/12 02:17 Order Type: Medication/IV Order Sub Type: Drip IV Ord No Str / End DTime Order as Written **Ord Status** Signed-By / Co-Signed By 2034190 08/03/12 23:38 COLIN A MARINO, MD norepinephrine bitartrate (LEVOPHED) 4 mg in dextros Active 2035096 08/04/12 02:22 vasopressin (PITRESSIN) 50 UNIT in sodium chloride Active MISTI E RILEY, RN Order Type: Medication/IV Order Sub Type: Injectable Ord No Str / End DTime Order as Written Ord Status Signed-By / Co-Signed By COLIN A MARINO, MD 2034346 08/03/12 23:38 SODIUM CHLORIDE 0.9% (1000 ML bag) Intravenous Validated 2034623 08/04/12 00:22 PIPERACILLIN-TAZOBACTAM (ZOSYN) 4.5G Intraver Validated 08/04/12 00:52 2034722 08/04/12 00:42 piperacillin-tazobactam 3.375 g Intravenous Q6H Active LISA M DIX, MD 2034723 08/04/12 00:42 clindamycin 900 mg/50 mL D5W Intravenous Q8H Active LISA M DIX, MDvancomycin 1000 mg/200 mL D5W intravenous ONE T Active 2034724 08/04/12 00:42 LISA M DIX, MD 08/04/12 00:42 Order Type: Nursing Order Sub Type: Activity Ord No Str / End DTime Order as Written Ord Status Signed-By / Co-Signed By 2034591 08/04/12 00:24 Bedrest: Strict LISA M DIX. MD Active 08/04/12 00:24 Order Type: Nursing Order Sub Type: Assessment Ord No Str / End DTime Order as Written Ord Status Signed-By / Co-Signed By 08/04/12 00:24 2034579 Assess Neurological Status every 1 hour LISA M DIX, MD 08/04/12 00:24 2034582 08/04/12 00:24 Assess Patient Weight Daily LISA M DIX, MD 08/04/12 00:24 2034583 08/04/12 00:24 Active LISA M DIX, MD Assess Intake and Output Q1 Hour

Entity: Tyler Page 5 of 8 ORE_X0AQ_0149_DSCH_LYNX.rpt version v1.00

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Pt. Name: ADAMS, RODNEY

TY-ADAMS, RODNEY-Enc# 4332873 R-I-I-8/3/2012 OneChart ED Physician Ord: -8/4/2012--ER0037-1pg **Orders Report** ADAMS, RODNEY Pt Name: 1290384 MRN: Pt ID: 2012058566 00043328731 Acct No: DOB: 45Y/M Age/Sex: Adm DTime: 08/03/2012 Atn Dr: DIX, LISA MD Dsch DTime: Entity: 0100 - Tyler Dx: Order Type: Nursing Order Sub Type: Communication Ord No Str / End DTime Order as Written Ord Status Signed-By / Co-Signed By 08/03/12 23:38 Notify Attending on arrival to nursing unit 2034338 Active COLIN A MARINO, MD 08/03/12 23:38 08/03/12 23:38 2034339 All Care Transfered to Attending MD Active COLIN A MARINO, MD 08/03/12 23:38 2034342 08/03/12 23:38 Notify if Pulse Oximetry Less than 92% COLIN A MARINO, MD Active 08/03/12 23:38 2034580 08/04/12 00:24 Titrate O2 via Nasal Cannula for Sat > or equal to 92% Active LISA M DIX, MD 08/04/12 00:24 2034586 08/04/12 00:24 Urinary Cath Protocol Active LISA M DIX, MD 08/04/12 00:24 2034587 08/04/12 00:24 Maintain urinary catheter due to strict intake and output. Active LISA M DIX, MD 08/04/12 00:24 2034588 08/04/12 00:24 Maintain urinary catheter due to total bedrest LISA M DIX, MD Active 08/04/12 00:24 2034589 08/04/12 00:24 LISA M DIX, MD Notify attending for abnormal CK / CKMB / Troponin res Active 08/04/12 00:24 2034705 08/04/12 00:24 Hypoglycemia Protocol Active LISA M DIX, MD 08/04/12 00:24 2034706 08/04/12 00:24 LISA M DIX, MD Potassium Protocol Nursing Communication Active 08/04/12 00:24 2034707 08/04/12 00:24 Trauma Electrolyte Protocol Active LISA M DIX, MD 08/04/12 00:24 2034709 08/04/12 00:24 LISA M DIX, MD Oral Care Protocol Active 08/04/12 00:24 2034710 08/04/12 00:24 Urinary Cath Protocol Active LISA M DIX, MD 08/04/12 00:24 2034743 08/04/12 00:42 Transfuse LISA M DIX, MD Units each over 30 minutes Active 08/04/12 00:42 Instructions: each over 30 minutes 2034744 08/04/12 00:42 Post transfusion labs (Specify) Nurse, Order requested Active LISA M DIX, MD 08/04/12 00:42 Instructions: Nurse, Order requested lab in OneChart when Transfusion completed. Order Type: Nursing Order Sub Type: Precaution Str / End DTime Order as Written **Ord Status** Signed-By / Co-Signed By 2034577 08/04/12 00:24 Precaution, Aspiration LISA M DIX, MD Active 08/04/12 00:24

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MRN: 1290384

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Pt Name: ADAMS, RODNEY

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Entity: Tyler

Orders Report

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Orders Report

ADAMS, RODNEY Pt Name: 1290384 MRN. Pt ID: 2012058566 00043328731 Acct No: DOB: Age/Sex: 45Y/M 08/03/2012 DIX, LISA MD Adm DTime: Atn Dr:

Dsch DTime:

Entity: 0100 - Tyler Dx:

Order	Type:	Nursing
-------	-------	---------

Order Sub Type: Treatment

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034578	08/04/12 00:24	Apply Sequential Compression Device	Active	LISA M DIX, MD
	08/04/12 00:24	γ		
2034584	08/04/12 00:24	Place Gastric Tube to Low Intermittent Suction	Active	LISA M DIX, MD
	08/04/12 00:24	ý.		
2034585	08/04/12 00:24	Insert Urinary Catheter (Indwelling)	Active	LISA M DIX, MD
	08/04/12 00;24			
2034701	08/04/12 00:24	Saline Lock x 2	Active	LISA M DIX, MD
	08/04/12 00:24			•
2034754	08/04/12 00:55	Apply Cooling Blanket d/c blanket when temp is less that	Active	LISA M DIX, MD
	08/04/12 00:55			

Instructions: d/c blanket when temp is less than †00.5

Order Type: Radiology

Order Sub Type: CT Scan

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034721	08/04/12 00:42	CT Head WO Contrast 20% Decrease in BP	Active	LISA M DIX, MD
	08/04/12 00:42	·		

Order Type: Radiology

Order Sub Type: DX Radiology

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2033975	08/03/12 22:36	XR Chest View STAT Palpitations	Complete	COLIN A MARINO, MD
	08/03/12 22:36			
2034704	08/05/12 05:00	XR Chest 1 View AM Routine Cardiogenic Shock	Active	LISA M DIX, MD
	08/05/12 05:00	9 9		

Order Type: Respiratory

Order Sub Type: BIPAPCPAP

Ord No	Str / End DTIme	Order as Written	Ord Status Signed-By / Co-Signed By
2034592	08/04/12 00:24	CPAP	Discontinue LISA M DIX, MD
	08/04/12 00:24	•	

Order Type: Respiratory

Order Sub Type: Diagnostic

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2033976	08/03/12 22:36	ABG with co-oximetry on room air STAT	Complete	COLIN A MARINO, MD
	08/03/12 22:36		·	
2034027	08/04/12 03:00	ABG with Co-oximetry and Electrolytes Q24H (TIMED)	Active	Allison M Sanders, RRT

Pt. Name: ADAMS, RODNEY MRN: 1290384 Entity: Tyler Page 7 of 8 ORE_X0AQ_0149_DSCH_LYNX.rpt version v1.00 Adm Date: 08/03/2012

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Orders Report

Pt Name: Pt ID:	ADAMS, RODNEY 2012058566		MRN: Acct No:	1290384 00043328731	
DOB:	•	*	Age/Sex:	45Y/M	
Adm DTime:	08/03/2012	4	Atn Dr:	DIX, LISA MD	
Dsch DTime:					
Entity:	0100 - Tyler	•			
Dx:	•				

Order Type: Respiratory

Order Sub Type: Diagnostic

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034593	08/04/12 00:24	ABG in 60 minutes and call results	Discontinue	LISA M DIX, MD
	08/04/12 00:24			
2034725	08/04/12 00:52	ABG with Co-oximetry and Electrolytes	Complete	LISA M DIX, MD
	08/04/12 00:52			

Instructions: after the 100 meq ivp bicarbonate

Order Type: Respiratory

Order Sub Type: Treatment Respiratory

Ord No	Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
2034581	08/04/12 00:24	Pulse Oximetry continuous	Discontinue	LISA M DIX, MD
	08/04/12 00:24			
2034708	08/04/12 00:24	Bronchodilator Protocol Treatment	Discontinue	LISA M DIX, MD
	08/04/12 00:24	-1		
2034749	08/04/12 00:53	Bronchodilator Protocol Treatment PRN	Active	Allison M Sanders, RRT

Order Type: Respiratory

Order Sub Type: Ventilator

Ord No	Str / End DTIme	Order as Written	Ord Status	Signed-By / Co-Signed By
2034028	08/04/12 01:00	tyVentilator - Standard RTQ3H&PRN	In progress	Allison M Sanders, RRT

Order Type: Vital Signs

Order Sub Type: Monitoring

Str / End DTime	Order as Written	Ord Status	Signed-By / Co-Signed By
08/03/12 23:38	Vital Signs every 4 hrs	Active	COLIN A MARINO, MD
08/03/12 23:38			• 2
08/03/12 23:38	Temperature: Every 4 hrs x 3 then every 8 hrs	Active	COLIN A MARINO, MD
08/03/12 23:38			
08/04/12 00:24	Vital Signs per unit protocol	Active	LISA M DIX, MD
08/04/12 00:24			
	08/03/12 23:38 08/03/12 23:38 08/03/12 23:38 08/03/12 23:38 08/03/12 23:38	08/03/12 23:38	08/03/12 23:38

Pt. Name: ADAMS, RODNEY

Entity: Tyler

MRN: 1290384 Page 8 of 8

Orders Report

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		경우 등 시작으로 가능한 사람들이 시간 등 하는 것들을 1일 등 상상 등 한 경향 사람들이 들었다. 그는 것 같은 것을 통해 보다 했다.
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Central Logic - Patient: RODNEY ADAMS

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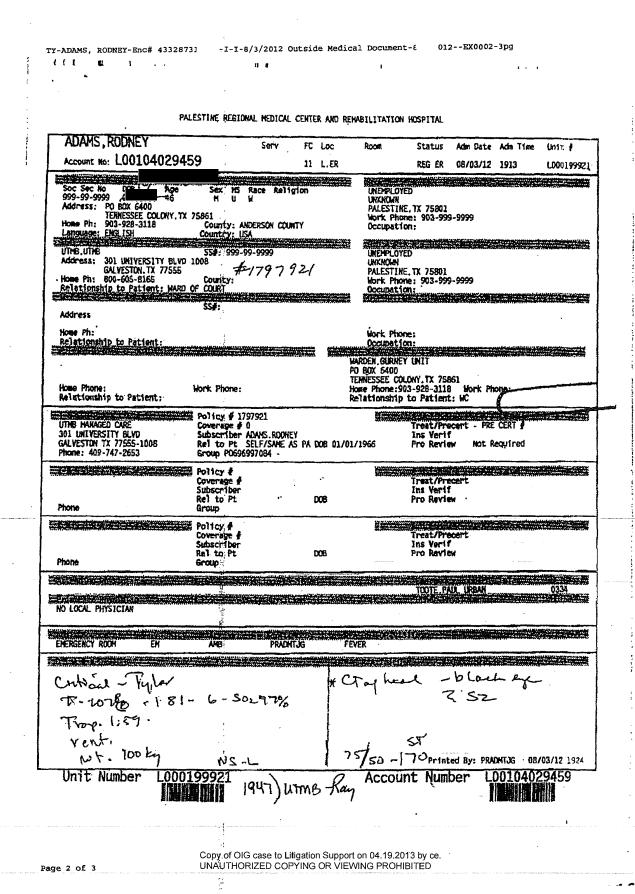
<u> </u>	
BETMC FIRSTCOMM TE	RANSFER REPORT
SUMMARY: CALL #150008	Printed on 08/03/2012 20:25
INITIATED by BORUNDA, GABRIEL (08/03/2012 20:02)	Status: OPENED by BORUNDA, GABRIEL (08/03/2012 20:24)
TRANSFER	Case Status: Active
Patient	Next of Kin
ADAMS, RODNEY Phone (903) 928-3118 PO BOX 6400 TENESSEE COLONY, TX 75861	No information available
Patient Detail	Chief Complaint
Birthdate (45 years) 5 Gender Male	Major Problem RESPIRATORY FAILURE, ACUTE MI, HYPERTHERMIA, 107.8, SEIZURE
Primary Caro Provider	Consult Provider
No provider selected	ZACHRY, WILLIAM Phone (903) 597-0351 ERMD TYLER TYLER, TX
Referring Provider #	Referring Location
TOOTE, PAUL Phone (903) 439-4077 KOPKINS MEMORIAL SULPHUR SPRINGS, TX	PALESTINE REGIONAL MEDICAL (903) 731-1000 (Phone)
Accepting Service and Provider	Accepting Location
Accepting Service: Emergency Medicine ZACHRY, WILLIAM Phone (903) 597-0351 ERMD TYLER TYLER, TX	ETMC TYLER
Medical Acceptance	Facility Acceptance
Status Accepted	Status Accepted
Decision Date 08/03/2012 20:08	Decision Date 08/03/2012 20:08
Call Initiated By Referring MD	Transfer Priority ED to ED
Transport	Placement
Date Initiated 08/03/2012 Type PALESTINE	Requested 08/03/2012 20:08 Unit E.D. Bed ER
20:08 EMS	Assigned 08/03/2012 20:08 Unit E.D. Bed ER Received 08/03/2012 20:08 Projected 08/03/2012 20:08 Confirmed 08/03/2012 20:08
Notifications	
No noti	fications completed

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ETMC PATIENT TRANSFER	RAND OVER COMMU	NICATION	
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Medications: direty	···		
Abnormal Laber: 100 1-57			ſ
Diagnostic Road by Radiologists (Yes () No Radiologist 's Name: C	Meile	
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Assessment: Major Dalpa:	heropher .		11
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Interventions (i.e. summer, cheef fubes): 1/2	- Valitas		
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Recommendation: Transfer	to BD ICU Floor Officer	(circle)	 -
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Mode of transport: Air (Include patient	weight: /OV kg/lbs) Groun	a)	
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Name of Transferring Physician: At Too	te Phone; 903	<u>-73/-//53</u>	. [
Questions please c	101: 95:300(101)	*************	
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Name: Adams, Rodne	$\mathbf{y} \in \mathcal{Y}$	SE FTA	
Account No: 43328731	r.		
BB ID #: NGZ9362		TYLE	R
Sample #: 10825456		East Taxis Medical Ceat Regional Hyalthcare Syste	er M
ABO/Rh: O Pos	Location: 2WB		
Antibody(ies):	Patient ID#: 3099	06	
Special Needs:			
	Product Informa	ation	
UNIT No: W035212184735			
ABO/Rh: O Pos	CMV:	82429	
Product Code: E0336V00 RED BL	OOD CELLS CPD>AS1/500mL/refg	: ResLeu:<5log6	
Product Expiration Date: 08/30/201		n	
Crossmatch Interpretation: Compati	•	Date/Time: 08/04/2012 03:30 AM.	
Antigens:	, sent in vincs	Date 11116. 00/04/2012 03:30 AM	
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Prohibiting Factors:	}		
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verifying the patient name, account all information agrees: Name: Signature	number, and sample number on this si	that completed all clerical checks including lip with the patient's armbands at bedside and the signature of	-
verifying the patient name, account all information agrees: Name: Pre-Transfusion V/S: Post-Transfusion V/S: BP: 14/5 Transfusion Started: 8	Name: Je Pulse: 119 Resp: 23 Tem 27-11-0635 Transfusion	thave completed all clerical checks including lip with the patient's armbands at bedside and strong lips with the patient's armbands at bedside and strong lips and strong lips lips lips lips lips lips lips lips	
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Name: Adams, Rodney Account No: 43328731 BB ID #: NGZ9362				E	MC
Sample #: 10825456			·	East Tex Regional I	as Medical Center HealthCare System
ABO/Rh: O Pos		ition: 2WB	•	-	
Antibody(ies): Special Needs:	·	ant ID#: 30996			
UNIT No: W035212151977	K	oduct Informat	ion		
ABO/Rh: O Pos	CMV:			(福祉 経過(福祉 福祉 展 82436	
			Bort augst		i ·
Product Code: E0336V00 RED BLOC			kesLeu:<>log6		
Product Expiration Date: 08/30/2012 1		*	Data Prima	00/04/2012 02-20 434	
Crossmatch Interpretation: Compatible	ı ech	ID: KDC2	Date/Time:	08/04/2012 03:30 AM	:
Antigens: Comments:				·	•
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Prohibiting Factors:		ınsfusion Infor			
all information agrees:	- B	Name	ip with the patient's a		
Name: // Signature	- A_ Resm	Name:	Jeffry Man Sign		,
Name: // Volumes Signature Pre-Transfusion V/S: BP FU I	rulse: <u>180</u> Resp:		Jeffry Man Sign 3:97+802:		.
Name: // Volumes Signature Pre-Transfusion V/S: BP-9747 F		2/ Temp	Jeffry Mar 5:93+802: 5:944.02:7		15
Name:	rulse: 1/4 Resp: 4/12 0635 Time	2/ Temp 23 Temp	Jeffrey Mar Sign 0: 93-8 02: 0: 94-7 02: 1		
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Name: Signature Pre-Transfusion V/S: BP: 772 F Prest-Transfusion V/S: BP: 772 F Transfusion Started: Det 0 Initial Date Amount transfused: 425 IN CASE OF TRANSFUSION REACT Stop transfusion at once. Clerical check at bedside? Y Name of physician notified:	Patient of	Transfusion : Disserved during SUSPECTED : Pulse	Teffrey Mar Sign 5: 97 7 02: 7 Stopped: Initial or g transfusion: V	By: 97 Au By: 97 Au By: 112 D8	
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Name: Signature Pre-Transfusion V/S: Post-Transfusion V/S: Prest-Transfusion Started: Initial Date Date Amount transfused: Stop transfusion at once. Clerical check at bedside? Name of physician notified: Send completed copy of this form to A. Remainder of unit with recip B. 10mL lavender top venous b C. Post transfusion urine sample. Check symptoms: Urticaria Chills Other Other	Patient of	Temp 23 Temp Transfusion : Observed durin SUSPECTED : Pulse patient Hematuria	Teffrey Mar Sign on Si	By: Of Au	
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0	0	0	0	, 0	:
Name: Adams, Rodney					MAT
Account No: 43328731	3				
BB ID #: NGZ9362	å				TYLER
Sample #: 10825456	is in			East Texe Regional H	s Medicul Center politicare System
ABO/Rh: O Pos	*	Location: POD1		•	
Antibody(ies):		Patient ID#: 30996			
Special Needs:	•				
		Product Informati	on	·	
UNIT No: W035212145438	5				
ABO/Rh: O Pos	- 1	CMV: anti-CMV Neg	ative	82650	
Product Code: E3088V00 Apheresis	PLATELETS	ACD-A/XX/20-24C R	esLeu:<5log6 2nd cor	ntainer	,
Product Expiration Date: 08/05/2012	1:59 PM	# in pool:			
Crossmatch Interpretation: Not Requi	red ·	Tech ID: KDC2	Date/Time: 0	08/04/2012 01:07 AM	
Antigens:					
Comments:					
Prohibiting Factors:					
	<u> </u>	Transfusion Inform	nation		···
Prior to starting this transfusion, an RI verifying the patient name, account nu all information agrees: Name: Signature Pre-Transfusion V/S: BP: 5444	inber, and sar	Name: Temp	with the patient's are significant.		
Transfusion Started: 07 8-4	-17 03 Time	Transfusion S	α	- 4-12 5 Time	25
Amount transfused: 275	,	Patient observed during	g transfusion:		
. Otop manufactor at crock	es No blood bank bient set	VS: BPPulse_with:	A THE SECTION ASSESSMENT	empO2	
C. Post transfusion urine samp 5. Check symptoms:	c (voided)	•			
Urticaria Chills Other	Fever	Hematuria	Shortness of bre	ath	
Completed by	n Thi	MD/RN I	Date 8-14.	Mine 070	5
					THE PERSON NAME OF TAXABLE OF TAX

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Page 1 of 1

ADAMS, RODNEY-Enc# 43328731	-1-I-8/3/2012 Transfusion	and Blood Serv. 3-8/4/2012TF0004-1	.pg
<u> </u>		Dec 20	
Name: Adams, Rodney	7	3356	MIL
Account No: 43328731	•	de marieda de la companya del la companya de la com	TYLER
BB ID #: NGZ9362	8	Eest Texa	ni Modical Center culticare System
Sample #: 10825456			ephthcare System
ABO/Rh: O Pos	Location: POD1		
Antibody(ies):	Patient ID#: 309	96	*
Special Needs:	To be a second		-
· 	Product Inform	2110n	E 315
UNIT No: W035212145346	Ú		
ABO/Rh: O Pos	CMV:	82355	7
roduct Code: E2555V00 PLASMA	÷		
roduct Expiration Date: 08/05/2012	₩		
crossmatch Interpretation: Not Requi	\$-	Date/Time: 08/04/2012 12:24 AM	1
ntigens:	100H ID: KDC2	13ate/1 title: 00/04/2012 12:24 AM	
omments:	1		
rohibiting Factors:	1		•
romormig raciois.	·	ormation	
Il information agrees.	Name:	VILLOUIVE Signaturo	į
re-Transfusion V/S: BP: 47/64 ost-Transfusion V/S: BP: 2/55	Pulse: 180 Resp: 21 Ter	np: <u>GG: 4</u> 02: By: By: By:	
ransfusion Started: 7 5-1		a Stopped: 97 8-4-12 on Time	3 0
mount transfused: 270	Patient observed dur	ing transfusion:	
CASE OF TRANSFUSION REAC	TION OR ACTUAL/SUSPECTED	ERROR:	
Stop transfusion at once.			
Clerical check at bedside? Y Name of physician notified:	es No VS: BP Puls	e Resp Temp O2	
Send completed copy of this form to	blood bank with:		i .
A. Remainder of unit with recip B. 10mL layender too venous h			
 B. 10mL lavender top venous b C. Post transfusion urine sample 	•		
Check symptoms:			
Urticaria Chills	Fever Hematuria	Shortness of breath	•
Other		The state of the s	
71/7	- V2-		
mpleted by Journal	nm MD/RN	Date 8-4-12 Time 07	25
mpleted by Johnson	nm MD/RN	Date 8-4-12 Time 07	05
mpleted by Johnson	nm MD/RN	Date 8-4-12 Time 07	05

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Name: Adams, Rodney	4) 14.				FT	MAC
Account No: 43328731	e ଜି			10/200		KARG
BB ID #: NGZ9362	¥*					TYLER
Sample #: 10825456	14. 14.				East Tel Regional	ns Medical Causer Medithoure System
ABO/Rh: O Pos	14 14	Location: POD1				
Antibody(ies):	tý	Patient ID#: 30996				
Special Needs:						:
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UNIT No: W035212176683	F				Elliel	
ABO/Rh: O Pos		CMV:	#1 = 1	8	515	ia min
roduct Code: E0701V00 FRESH F	RÖZEN PI A					
roduct Expiration Date: 08/05/2012		# in pool:				:
rossmatch Interpretation: Not Requi	*	Tech ID: KDC2	Date/Time:	08/04/201	2 12:24 AN	1
ntigens:						
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rohibiting Factors:			•			
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l information agrees:	· 	Name: VV	Burger	nature		4
Signature	Pulsard 25	Page 21 Tamp	-	Par-	00 B.	سـ
re-Transfusion V/S: BP: 83/85	Pulse: 128		99,702:	By:	97/2	+
Signature	Pulse: 177	Resp: 21 Temp: 2732 Transfusion Store	99,702: 99,902:	By: By: By: Date	17/2 12/2 12/2 Time	*
re-Transfusion V/S: BP: 98/65 est-Transfusion V/S: BP: 96/64	Pulse: <b>187</b> 4-1 <b>7</b> C	Resp: 21 Temp:	94, 702; 94, 702; pped: 97	By: By: Date	772 7023 Time	1
re-Transfusion V/S: BP: 98/65 sst-Transfusion V/S: BP: 96/69 ransfusion Started: 97 Fridial Date	Pulse: <u>/87</u> 4-/2-0 Tim	Resp: 21 Temp: 2732 Transfusion Store Patient observed during t	94.702: 94.702: pped: 97 Infial	By: By: By: Date	DOM DOTS Time	
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Page 1 of 1

Name: Adams, Rodn Account No: 43328731 BB ID #: NGZ9362		AL TYLE
Sample #: 10825456	Enst Yezer Medi	ical Centi are Syste
ABO/Rh: O Pos	Location: POD1	·
Antibody(ies): Special Needs:	Patient ID#: 30996	٠
	Product Information	
UNIT No: W03521217669		
ABO/Rh: O Pos	CMV:	
Product Code: E0701V00 FRESI	SH FROZEN PLASMAJCPD/XX/<=-18C	
Product Expiration Date: 08/05/20	1012 12:04 AM # in pool:	
Crossmatch Interpretation: Not ReAntigens:	Required Tech ID: KDC2 Date/Time: 08/04/2012 12:24 AM	
Comments:	1	
Prohibiting Factors:		
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Name: (KAT, EN Signature	- it	
Name: Signature Pre-Transfusion V/S: BP: ##		
Name: Signature Pre-Transfusion V/S: BP: ## Post-Transfusion V/S: BP: ## Transfusion Started: ##  8	###Pulse: 17 Resp: 21 Temp: 9972 02: By:	
Name: Signature Pre-Transfusion V/S: BP: ## Post-Transfusion V/S: BP: ## Transfusion Started: ##  8	Signature   Sign	
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Name: Signature Pre-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Transfusion Started: Representation Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion Representation Repitember Representation Representation Representation Representat	Patient observed during transfusion:  Signature Signature By: 127 By: 124 By:	
Name: Signature Pre-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Transfusion Started: Republication Started: Post-Transfusion Started: Republication Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion Republication Republi	Pulse: P Resp: 21 Temp: 997 02: By: 998 25 Pulse: 127 Resp: 21 Temp: 797 02: By: 998 25 Pulse: 127 Resp: 21 Temp: 197 02: By: 998 25 Pulse: 128 25 Pulse: 12	
Name: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Representation V/S: BP: Signature Representation Started: Representation Started: Representation Represen	Pulse: P Resp: 21 Temp: 977 O2: By: 977 By: Pulse: 177 Resp: 71 Temp: 777 O2: By: 977 D2:	
Name: Signature Pre-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Transfusion Started: Republication Started: Post-Transfusion Started: Republication Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion Started: Post-Transfusion at once.  In Case Of Transfusion at once. Clerical check at bedside? Name of physician notified: Post-Transfusion unit with B. IomL lavender top vence. Post transfusion urine sa	Pulse: P Resp: 71 Temp: 977 02: By: 977 02	
Name: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Post-Transfusion V/S: BP: Signature Sign	Pulse: P Resp: 2/ Temp: 97/2 02: By: P Resp: 2/ Temp: 77/2 02: By: P Resp: P Res	
Name: Signature Pre-Transfusion V/S: BP: Signature  Remainder: Remainder of the signature Remainder of unit with: B. 10mL lavender top vence C. Post transfusion urine sa Check symptoms: Urticaria Chills	Pulse: P Resp: 71 Temp: 977 02: By: 977 02	
Name: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Pre-Transfusion V/S: BP: Signature Post-Transfusion V/S: BP: Signature Sign	Pulse: P Resp: 71 Temp: 977 O2: By: 977 By: 977 O2: By	
Name: Signature Pre-Transfusion V/S: BP: Signature  Remainder: Remainder of the signature Remainder of unit with: B. 10mL lavender top vence C. Post transfusion urine sa Check symptoms: Urticaria Chills	Pulse: P Resp: 2/ Temp: 97/2 02: By: P Resp: 2/ Temp: 77/2 02: By: P Resp: P Res	
Name: Signature Pre-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Transfusion Started: Separate Separa	Pulse: P Resp: 71 Temp: 977 O2: By: 977 By: 977 O2: By	
Name: Signature Pre-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Post-Transfusion V/S: BP: FR Transfusion Started: Separate Separa	Pulse: P Resp: 71 Temp: 977 O2: By: 977 By: 977 O2: By	

Name: Adams, Rodney		<u></u> <b> ■  ETM</b>
BB ID #: NGZ9362	,	TYL
Sample #: 10825456	•	East Texás Madical Cea Regional Healthcare Sys:
ABO/Rh: O Pos	Location: POD1	
Antibody(ies):	Patient ID#: 30996	ł
Special Needs:		
	Product Information	
UNIT No: W035212127087 E		
01.121 1.01 11.00 MIDIE 100, 1		
ABO/Rh: O Pos	CMV:	61000
Product Code: E0701V00 FRESH FROZEN	PLASMA CPD/XX/<=-18C	
Product Expiration Date: 08/05/2012 12:04 A	AM # in pool:	
Crossmatch Interpretation: Not Required	Tech ID: KDC2	Date/Time: 08/04/2012 12:24 AM
Antigens:		i
Comments:		į.
Prohibiting Factors:		
re-Transfusion V/S: BP: W/W Pulse:	Name: // /32 Resp: 31 Temp: 99	Signature  Signature  1902: By: 97kg
ost-Transfusion V/S: BP: Pulse:	Resp: 01 Temp: 99	902: By: 4
OSC-TTAILSTUSION VIS. BI	1 Kesp. 77	7-02.
ransfusion Started: 4/ 8-4-7	Time Transfusion Stoppe	
mount transfused: 245		d: T-W-126219 Thirtial Date Time
Rijdial Date	Patient observed during trans	d: 9 J-4-12-02-9 Infitial Date Time
mount transfused: 245  I CASE OF TRANSFUSION REACTION ( Stop transfusion at once.	Patient observed during trans OR ACTUAL/SUSPECTED ERRO	d: 9 J-4-12-02-9 Infitial Date Time
mount transfused: 245  I CASE OF TRANSFUSION REACTION ( Stop transfusion at once, Clerical check at bedside? Yes	Patient observed during trans OR ACTUAL/SUSPECTED ERROR	d: T-4-12-62-19 Initial Date Time  Gusion:
mount transfused: 245  I CASE OF TRANSFUSION REACTION ( Stop transfusion at once.	Patient observed during trans  DR ACTUAL/SUSPECTED ERRO  No  VS: BPPulse	d: 9 J-4-12-02-9 Infitial Date Time
mount transfused: 245  I CASE OF TRANSFUSION REACTION ( Stop transfusion at once, Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blook A. Remainder of unit with recipient se	Patient observed during trans  DR ACTUAL/SUSPECTED ERRO  No  VS: BPPulse d bank with:	d: T-4-12-62-19 Initial Date Time  Gusion:
mount transfused: 245  I CASE OF TRANSFUSION REACTION ( Stop transfusion at once, Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blood A. Remainder of unit with recipient set B. 10mL lavender top venous blood s	Patient observed during trans  DR ACTUAL/SUSPECTED ERRO  No  VS: BPPulse  I bank with:  et pecimen from patient	d: T-4-12-62-19 Initial Date Time  Gusion:
mount transfused: 245  I CASE OF TRANSFUSION REACTION ( Stop transfusion at once, Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blook A. Remainder of unit with recipient se	Patient observed during trans  DR ACTUAL/SUSPECTED ERRO  No  VS: BPPulse  I bank with:  et pecimen from patient	d: T-4-12-62-19 Initial Date Time  Gusion:
mount transfused: 2 45  CASE OF TRANSFUSION REACTION of Stop transfusion at once. Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blood A. Remainder of unit with recipient so B. 10mL lavender top venous blood so C. Post transfusion urine sample (voic Check symptoms:	Patient observed during trans OR ACTUAL/SUSPECTED ERROR No VS: BPPulse d bank with: et pecimen from patient ded)	d: T-4-12-62-19 Initial Date Time  Gusion:
mount transfused: 2 45  CASE OF TRANSFUSION REACTION of Stop transfusion at once. Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blood A. Remainder of unit with recipient so B. 10mL lavender top venous blood so C. Post transfusion urine sample (voic Check symptoms:	Patient observed during trans  OR ACTUAL/SUSPECTED ERRO  No  VS: BP Pulse I bank with: et pecimen from patient led)	d: T-4-12-62-19 Initial Date Time  fusion:  R:  Resp Temp O2
mount transfused: 2 45  CASE OF TRANSFUSION REACTION of Stop transfusion at once. Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blood. A. Remainder of unit with recipient st. B. 10mL lavender top venous blood st. C. Post transfusion urine sample (voice the completed copy) Check symptoms:  Urticaria Chills Foother	Patient observed during trans  OR ACTUAL/SUSPECTED ERRO  No  VS: BP Pulse d bank with:  et pecimen from patient ded)  ever Hematuria S	d: T-4-12 6219 Initial Date Time  fusion:  R:  RespTempO2
mount transfused: 245  CASE OF TRANSFUSION REACTION of Stop transfusion at once. Clerical check at bedside? Yes Name of physician notified: Send completed copy of this form to blood A. Remainder of unit with recipient st B. 10mL lavender top venous blood st C. Post transfusion urine sample (void Check symptoms:  Urticaria Chills Fe	Patient observed during trans  OR ACTUAL/SUSPECTED ERRO  No  VS: BP Pulse d bank with:  et pecimen from patient ded)  ever Hematuria S	d: The Told Date Time fusion:  R:  Resp Temp O2

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Page 1 of 1

				á	$oldsymbol{\smile}$
Name: Adams, Rodney Account No: 43328731	•				ETMC
BB ID #: NGZ9362 Sample #: 10825456		•		Si Reg	est Yexas Medical Center least Mediticary System
ABO/Rh: O Pos		cation: POD1			
Antibody(ies): Special Needs:	Pat	tient ID#: 30996			·
***************************************	;	Product Informatio	n		
UNIT No: W035212142587	⁴ R				
ABO/Rh: O Neg	CM	<b>/</b> :		82351	
Product Code: E2555V00 PLASMA C	PD/XX/<=-18C Fr	rozen <=24h			
Product Expiration Date: 08/05/2012 I	2:04 AM # in	ı pool:	•		
Crossmatch Interpretation: Not Requir		th ID: KDC2	Date/Time:	08/04/2012 12:24	4 AM
Antigens:					.
Comments:					
Prohibiting Factors:					
Prior to starting this transfusion, an RN verifying the patient name, account nur all information agrees:  Name: RN Signature	nber, and sample m	umber on this slip	with the patient's a	rrical checks inch rmbands at bedsi	ding:
verifying the patient name, account nur all information agrees:  Name: Pre-Transfusion V/S: BP: #5/47/F	ulse: 130 Respulse: 150 Respulse: 150 Resp	Name:  D: 77 Temp: D: 77 Temp:	ve completed all cle with the patients a Sign GH/6 02:	rmbands at bedsi	ding: de and
verifying the patient name, account nurall information agrees:  Name: Pre-Transfusion V/S: BP: #8/47/5  Post-Transfusion V/S: BP: #8/47/5  Pransfusion Started: BP: #8/47/5  Date	ulse: 175 Respulse: 170 Respul	Name:	we completed all cle with the patients a Sign G16 02: G17 02: opped: G18	rmbands at bedsi	de and
Pre-Transfusion V/S: BP: ##################################	ulse: 175 Respulse: 170 Respul	Name:	ve completed all cle with the patients a  Sign  Gue O2:  The Co2:  opped: Infitial  transfusion:	rmbands at bedsi	de and
Pre-Transfusion V/S: BP: ##################################	ulse: 175 Respulse: 170 Respul	Name:	ve completed all cle with the patients a  Sign  Gue O2:  The Co2:  opped: Infitial  transfusion:	rmbands at bedsi	de and
Pre-Transfusion V/S: BP: F///Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F/////  Transfusion Started: B-44  Amount transfused: Amoun	ulse: / 30 Respulse:	Name:	ve completed all cle with the patients a  Sign  Gue O2:  The Co2:  opped: Infitial  transfusion:	rmbands at bedsi	ding: de and  // // // // // // // // // // // // /
Pre-Transfusion V/S: BP: F/F/P Post-Transfusion V/S: BP: F/F/P Pre-Transfusion V/S: BP: F/F/P Post-Transfusion V/S: BP: F/F/P Transfusion Started: B-4 Amount transfused: Date  N CASE OF TRANSFUSION REACT  Stop transfusion at once.  Clerical check at bedside?  Name of physician notified:	ulse: /30 Respulse: /30 Respul	Name:	ve completed all cle with the patients a  Sign  GLO 2:  GLO 2:  Opped: O	rmbands at bedsi	de and de
Pre-Transfusion V/S: BP: F///Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F/////Pre-Transfusion Started: BP: F//// Amount transfused: BP: F//// Amount transfused: BP: F////  Amount transfused: Pre-Transfusion Started: BP: F////  Amount transfused: BP: F////  Amount transfused: Pre-Transfusion Started: BP: F////  Amount transfused: Pre-Transfusion React  Stop transfusion at once.  Clerical check at bedside?  Name of physician notified:  Send completed copy of this form to A. Remainder of unit with reciping	ulse: /30 Respulse: /30 Respul	Name:	ve completed all cle with the patients a  Sign  GLO 2:  GLO 2:  Opped: O	mbands at bedsi	de and
Pre-Transfusion V/S: BP: ##################################	ulse: // S Respulse: // Patient  ION OR ACTUAL  ION	Name:	ve completed all cle with the patients a  Sign  GLO 2:  GLO 2:  Opped: Opped: Initial  transfusion:  RROR:	mbands at bedsi	ding: de and
Pre-Transfusion V/S: BP: F///Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F////Pre-Transfusion V/S: BP: F/////Pre-Transfusion Started: BP: F//// Amount transfused: BP: F//// Amount transfused: BP: F////  Amount transfused: Pre-Transfusion Started: BP: F////  Amount transfused: BP: F////  Amount transfused: Pre-Transfusion Started: BP: F////  Amount transfused: Pre-Transfusion React  Stop transfusion at once.  Clerical check at bedside?  Name of physician notified:  Send completed copy of this form to A. Remainder of unit with reciping	ulse: // S Respulse: // Patient  ION OR ACTUAL  ION	Name:	ve completed all cle with the patients a  Sign  GLO 2:  GLO 2:  Opped: Opped: Initial  transfusion:  RROR:	mbands at bedsi	de and
Pre-Transfusion V/S: BP: B/F/S Post-Transfusion V/S: BP: B/F/S Post transfusion at once. Clerical check at bedside? Name of physician notified: Send completed copy of this form to A. Remainder of unit with recipi B. 10mL lavender top venous bl C. Post transfusion urine sample. Check symptoms: Urticaria Chills	ulse: // S Respulse: // Patient  ION OR ACTUAL  ION	Name:	ve completed all cle with the patients a  Sign  GLO 2:  GLO 2:  Opped: Opped: Initial  transfusion:  RROR:	mbands at bedsi	ding de and
Pre-Transfusion V/S: BP: B/F/F	Julse: 125 Respulse: 150 Respulse: 150 Respulse: 170 Respu	Name:	ve completed all cle with the patients a  Sign  Graph O2:  Graph O2:  opped: O1  finitial  transfusion:  RROR:  RespT	mbands at bedsi	ding de and
Pre-Transfusion V/S: BP: B/F/S Post-Transfusion V/S: BP: B/F/S Post transfusion at once. Clerical check at bedside? Name of physician notified: Send completed copy of this form to A. Remainder of unit with recipi B. 10mL lavender top venous bl C. Post transfusion urine sample. Check symptoms: Urticaria Chills	Julse: 125 Respulse: 150 Respulse: 150 Respulse: 170 Respu	Name:	ve completed all cle with the patients a  Sign  Grab 02:  Grab 02:  Grap 07  Initial  transfusion:  RROR:	mbands at bedsi	ding: de and  P2  0215 ime
Pre-Transfusion V/S: BP: B/F/F	Julse: 125 Respulse: 150 Respulse: 150 Respulse: 170 Respu	Name:	ve completed all cle with the patients a  Sign  Graph O2:  Graph O2:  opped: O1  finitial  transfusion:  RROR:  RespT	mbands at bedsi	de and
Pre-Transfusion V/S: BP: B/F/F	Julse: 125 Respulse: 150 Respulse: 150 Respulse: 170 Respu	Name:	ve completed all cle with the patients a  Sign  Graph O2:  Graph O2:  opped: O1  finitial  transfusion:  RROR:  RespT	mbands at bedsi	de and

		O		•	
Name: Adams, Rodn	ev		•		TAAC
Account No: 43328731					
BB ID #: NGZ9362	<b>₹.</b>				TYLER
Sample #: 10825456			ĺ		Texas Medical Center oal Healthcare System
ABO/Rh: O Pos		Location: POD1			
Antibody(ies):		Patient ID#: 30996			
Special Needs:					
ing angun talant sadin Salant sa a band d'Alb & SSS bay P o d'Alb Salant A		Product Informati	on		NI E II II
UNIT No: W0352121271	20 7				
ABO/Rh: O Pos		CMV:		81652	
Product Code: E0701V00 FRES	H FRÖZEN PLA	SMA CPD/XX/<=-18C			
Product Expiration Date: 08/05/20	j.	# in pool:			
Crossmatch Interpretation: Not R		Tech ID: KDC2	Date/Time:	08/04/2012 12:24	AM
Antigens:			·: i		
Comments:					
Prohibiting Factors:	()				
Prior to starting this transfusion, a verifying the patient name, account all information agrees;  Name: Signature	nt number, and sa	mple number on this slip	by with the patient's and By Sign	mbands at bedside	
verifying the patient name, account all information agrees; Name: Signature Pre-Transfusion V/S: BP:8 2	nt number, and sa	Name: Name: Temp	by with the patient's and By Sign	mbands at bedside	
verifying the patient name, account all information agrees; Name: Signature Pre-Transfusion V/S: BP: 83 Post-Transfusion V/S: BP: 94	ont number, and sa	Name: Name: Armonia Signature Signat	p with the patient's at Market Sign Sign Sign P. 702:	mbands at bedside	
verifying the patient name, account all information agrees; Name: Signature Pre-Transfusion V/S: BP: 87 Post-Transfusion V/S: BP: 97 Transfusion Started: Da	Spulse:	Name: Name: Armonia Slip	p with the patient's at Sign Sign Sign Sign Sign Sign Sign Sign	mbands at bedside	
verifying the patient name, account all information agrices; Name: W. Signature Pre-Transfusion V/S: BP: 87 Post-Transfusion V/S: BP: 97 Transfusion Started: Da Amount transfused: 77 N CASE OF TRANSFUSION RE	SPulse:  Pulse:  Time  CACTION OR ACC	Name:	p with the patient's at Mountain Sign : 92 9 02:  Stopped: Date of the patient's at the pat	mbands at bedside	
verifying the patient name, account all information agrices; Name: W. Signature Pre-Transfusion V/S: BP: 87 Post-Transfusion V/S: BP: 97 Transfusion Started: Da Amount transfused: 77 N CASE OF TRANSFUSION RE 1. Stop transfusion at once.	SPulse:  Pulse:  Time  CACTION OR ACC	Name:	p with the patient's at Mountain Sign : 92 9 02:  Stopped: Date of the patient's at the pat	mbands at bedside	
verifying the patient name, account all information agrices; Name: Signature Pre-Transfusion V/S: BP: 87 Post-Transfusion V/S: BP: 97 Transfusion Started: Da Amount transfused: 77  N CASE OF TRANSFUSION RE 1. Stop transfusion at once. 2. Clerical check at bedside? 3. Name of physician notified:	SPulse:  Pulse:  Tim  ACTION OR ACTI	Name:	p with the patient's at Work Sign Sign Sign Stopped: April 1 Stopped: Apri	mbands at bedside	
verifying the patient name, accounall information agrees; Name: B. Signature Pre-Transfusion V/S: BP: B. Transfusion Started: Da  Amount transfused: D.  N CASE OF TRANSFUSION RE  1. Stop transfusion at once. Clerical check at bedside? Name of physician notified: Send completed copy of this fo	SPulse:  Pulse:  Tim  ACTION OR ACTI	Name:	p with the patient's at Work Sign Sign Sign Stopped: April 1 Stopped: Apri	mbands at bedside  atture  By:  By:  Tu	
verifying the patient name, account all information agrices; Name: Signature Pre-Transfusion V/S: BP: 37 Post-Transfusion V/S: BP: 37 Transfusion Started: 77 Amount transfused: 77 To CASE OF TRANSFUSION RE 1. Stop transfusion at once. 2. Clerical check at bedside? 3. Name of physician notified: 3. Send completed copy of this for A. Remainder of unit with B. 10mL lavender top vene	Pulse:  Pulse:  Tim  ACTION OR ACTIO	Name:	p with the patient's at Work Sign Sign Sign Stopped: April 1 Stopped: Apri	mbands at bedside  atture  By:  By:  Tu	
verifying the patient name, account all information agrices; Name: Signature Pre-Transfusion V/S: BP: 37 Post-Transfusion V/S: BP: 37 Transfusion Started: 77 Amount transfused: 77 To CASE OF TRANSFUSION RE 1. Stop transfusion at once. 2. Clerical check at bedside? 3. Name of physician notified: 3. Send completed copy of this for A. Remainder of unit with B. 10mL lavender top vene C. Post transfusion urine se	Pulse:  Pulse:  Tim  ACTION OR ACTIO	Name:	p with the patient's at Work Sign Sign Sign Stopped: April 1 Stopped: Apri	mbands at bedside  atture  By:  By:  Tu	
verifying the patient name, account all information agrices; Name: W. Signature Pre-Transfusion V/S: BP: 87 Post-Transfusion V/S: BP: 97 Transfusion Started: Daily Dail	EACTION OR ACTION to blood bank recipient set ous blood specimample (voided)	Name:	p with the patient's at Sign Sign Sign Sign Stopped: April Stopped	mbands at bedside  atture  By: 9999  By: 9799  Tu	
verifying the patient name, account all information agrices; Name: Signature Pre-Transfusion V/S: BP: 37 Post-Transfusion V/S: BP: 37 Transfusion Started: 77 Amount transfused: 77 To CASE OF TRANSFUSION RE 1. Stop transfusion at once. 2. Clerical check at bedside? 3. Name of physician notified: 3. Send completed copy of this for A. Remainder of unit with B. 10mL lavender top vene C. Post transfusion urine se	Pulse:  Pulse:  Tim  ACTION OR ACTIO	Name:	p with the patient's at Work Sign Sign Sign Stopped: April 1 Stopped: Apri	mbands at bedside  atture  By: 9999  By: 9799  Tu	
verifying the patient name, accounall information agrees; Name: Representation agrees; Name: Representation v/S: BP: Represent	EACTION OR ACTION to blood bank recipient set ous blood specimample (voided)	Name:	p with the patient's at Sign Sign Sign Sign Sign Sign Sign Sign	mbands at bedside  atture  By:  By:  Tu  cath	
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verifying the patient name, accounall information agrees; Name: Representation agrees; Name: Representation v/S: BP: Represent	EACTION OR ACTION to blood bank recipient set ous blood specimample (voided)	Name:	p with the patient's at Sign Sign Sign Sign Sign Sign Sign Sign	mbands at bedside  atture  By:  By:  Tu  cath	

0 0			. <b>)</b>	
Name: Adams, Rodney		900	FTMC	
Account No: 43328731				
BB ID #: NGZ9362		· ·	TYLER	
Sample #: 10825456	,		East Texas Medical Center Regional Healthcare System	
ABO/Rh: O Pos	Location: 2WB			
Antibody(ies):	Patient ID#: 30996			
Special Needs:		! .		
	Product Information	»n		_
UNIT No: 32FF88103				
	•			
ABO/Rh: O Pos	CMV:		82170	
Product Code: 04730 Red Blood Cells	- AS-3 Leukoreduced			
Product Expiration Date: 08/28/2012 11:59 F	PM # in pool:	į		
Crossmatch Interpretation: Compatible	Tech ID: KDC2	Date/Time: 08/04/2	012 03:30 AM	
Antigens:			•	
Comments:				
Prohibiting Factors:			•	
	Transfusion Inform	nation		
all information agreed: Name: Signature	Name:	Signature Signature	OGRA	
Pre-Transfusion V/S: BP: 47/0False:		(14.6-02: 67/08	S. Harri	
Post-Transfusion V/S: BP: 60/7 Pulse:	NO350 Transfusion S	topped: \\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	120615	
Amount transfused: 306	Time Patient observed during	Infinial Date transfusion:	Time	
N CASE OF TRANSFUSION REACTION	OR ACTUAL/SUSPECTED E	RROR:		
. Stop transfusion at once Clerical check at bedside? Yes	No			
Name of physician notified:		Resp Temp	O2	
. Send completed copy of this form to bloo	d bank with:	:		
A. Remainder of unit with recipient s  B. 10mL layender top venous blood s	•			
<ul> <li>B. 10mL lavender top venous blood a</li> <li>C. Post transfusion urine sample (voi</li> </ul>				
. Check symptoms:				
Urticaria Chills F	ever Hematuria	Shortness of breath		
Other				
	MD/RN D	ate : Ti	ne	
	MD/RN D	atc Ti	ne	
Completed by	MD/RN D	lateTi	ne	

U	0 0	Blood Services-8/4/2012TF0004-lpg
Name: Adams, Rodne	<b>ev</b>	<b>FTAAC</b>
Account No: 43328731	· v	
BB ID #: NGZ9362		זאט
Sample #: 10825456		East Telus Medicut Cen Regional Healthcare Syst
ABO/Rh: O Pos	Location: 2WB	
Antibody(ies):	Patient ID#: 30996	
Special Needs:	i	
	Product Informati	ion
UNIT No: W035212000042	2 L	
ABO/Rh: O Pos	CMV:	21 年 1 1 第15年 第16年 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	i.	Part mus Slook
Product Code: E0336 VOU RED BY	LOOD CELLS CPD>AS1/500mL/refg F	
Crossmatch Interpretation: Compai	·	Date/Time: 08/04/2012 03:30 AM
Antigens:	tiole feeli id. RICZ	Date Time. 08/04/2012 03:30 AN
Comments:		
Prohibiting Factors:		
	Transfusion Inform	wation-
		we completed all clerical checks including with the patient's armbands at bedside and
verifying the patient name, account all information agrees:  Name:  Pre-Transfusion V/S: BP: 461	Name: Name: Pulse: 127 Resp: 2 Temp	with the patient's armbands at bedside and  Signature  O2: 674 By: 97h
verifying the patient name, account all information agrees:  Name:  Pre-Transfusion V/S: BP: 461	number and sample number on this sli	with the patient's armbands at bedside and  Signature O2: GTA By: 97/h  By:
verifying the patient name, account all information agrees:  Name:  Pre-Transfusion V/S: BP: 451  Post-Transfusion V/S: BP: 6455	Name:	with the patient's armbands at bedside and  Signature O2: 674 By: 97/h By: Time
verifying the patient name, account all information agrees:  Name:  Pre-Transfusion V/S: BP: 451  Post-Transfusion V/S: BP: 6752  Transfusion Started: Date  Amount transfused: 250	Name:	with the patient's armbands at bedside and  Signature O2: GTG By: OTh  O2: By:  Stopped: 9-4-17 059  Time  g transfusion:
verifying the patient name, account all information agrees:  Name:  Pre-Transfusion V/S:  Post-Transfusion V/S:  BP: 43  Transfusion Started:  Amount transfused:  IN CASE OF TRANSFUSION REAL.  Stop transfusion at once.	Name:  Name:  Name:  Pulse: 122 Resp: 21 Temp  Pulse: 122 Resp: 14 Temp  Transfusion  Patient observed during  ACTION OR ACTUAL/SUSPECTED I	with the patient's armbands at bedside and  Signature O2: GTG By: OTh  O2: By:  Stopped: 9-4-17 059  Time  g transfusion:
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FREY R. COPELAND, PA-C

PATIENT:

ADAMS, RODNEY

MRN:

1797921

User:

WILBANKS, CYNTHIA M. L.V.N.

COGENTIN 1MG TABS

Sig:

1 x TABS ORAL TWICE DAILY

Order Date: 08/03/2012 09:52 Start Date: 08/03/2012 09:52 Auto Stop Date: 09/02/2012 09:52

Special

Instructions: NO RFS CO JAIL INTAKE

VERBAL / PHONE ORDER

Duration:

30 Days

Refills:

None

Allow Generic - No product selection indicated

Rx Written On: 08/03/2012

CYMBALTA # 60MG CAPS

Sig: 1 x CAPS ORAL TWICE DAILY
Order Date: 08/03/2012 09:53
Start Date: 08/03/2012 09:53

Auto Stop Date: 09/02/2012 09:53

Special

Instructions:

CO JAIL INTAKE NO RFS

VERBAL / PHONE ORDER

Duration:

30 Days

Refills:

None

Allow Generic - No product selection indicated

Rx Written On: 08/03/2012

Electronically Signed by COPELAND, JEFFREY R. PA-C on 08/03/2012. ##And No Others##

> Copy of OIG case to Litigation Support on 04.19.2013 by ce. UNAUTHORIZED COPYING OR VIEWING PROHIBITED

OIG- Adams 184

__ __

JEFFRLY R. COPELAND, PA-C

PATIENT:

ADAMS, RODNEY

MRN:

1797921

User:

WILBANKS, CYNTHIA M. L.V.N.

VISTARIL # 50MG CAPS

Sig: 1 x CAPS ORAL TWICE DAILY
Order Date: 08/03/2012 09:55
Start Date: 08/03/2012 09:55
Auto Stop Date: 09/02/2012 09:55
Special

Special

Instructions: CO JAIL INTAKE NO RFS

VERBAL / PHONE ORDER

Duration:

30 Days None

Refills:

Allow Generic - No product selection indicated Rx Written On: 08/03/2012

Electronically Signed by COPELAND, JEFFREY R. PA-C on 08/03/2012. ##And No Others##_

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